Entangled in the *stigma machine*: An exploration of the dynamics of stigma and resistance in the lives of women engaged with the UK social security system

Thesis submitted in accordance with the requirements of the University of Liverpool for the degree of Doctor in Philosophy

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Declaration: This thesis is entirely my own work and has not been submitted, in full, or in part, for the award of a higher degree at any other educational institution.

Abstract

The recent retheorisation of stigma (Tyler, 2020) has transformed understandings of the concept from its individualistic, apolitical usage in twentieth century Sociology, instead enabling an overtly political understanding of stigma as a form of power *deliberately* crafted to legitimise and amplify unequal social relations. This can be applied to the longstanding stigma attached to social security receipt in Britain, which has renewed significance in the contemporary era of neoliberal austerity. The unprecedented welfare reforms since the 2007/8 financial crisis have worked in conjunction with stigmatising policy narratives and media depictions functioning to legitimise and garner consent for such punitive policy shifts. These reforms have disproportionately gendered effects and significantly impact on disabled people. Nonetheless, there is a shortage of research empirically examining the experiences of female welfare recipients in this context, and the intersection of class, gender and disability, hence this is an under-theorised yet pertinent area of enquiry.

This thesis therefore explores the dynamics of stigma and resistance in the lives of sixteen women in Merseyside currently or intermittently claiming a range of means-tested and non-means-tested benefits. Drawing on data from in-depth, semi-structured interviews, and informed by an intersectional feminist approach, the study illuminates how stigma operates and impacts on these women's everyday lives. Owing to the group comprising of women with a variation of circumstances and benefit claiming categories, with some claiming due to disability and mental health issues, some mothers and some in paid employment, the study enables a rich, holistic understanding of the mechanisms and impacts of stigma.

The thesis findings demonstrate the ubiquity of stigma as a pervasive form of power driving, legitimating and amplifying inequalities based on gender, class and disability (Tyler, 2020). Institutionally-embedded stigma is shown to permeate every aspect of the system, from its design and accessibility, to the implementation of welfare policies and the forms of conditionality and punitiveness imposed. The system is demonstrated to be not only *based on* and *legitimised by* stigma, but to deliberately *inflict* stigma onto vulnerable groups, adding weight to conceptions of austerity as violent. Furthermore, the findings illustrate how state-orchestrated stigma bleeds into everyday interactions and self-perceptions, and how benefits stigma intersects with gender, class and disability. Another key contribution is the insights offered about resistance strategies and stigma responses; rather than signifying a complete disavowal of stigma, responses are contradictory and complex, thus demonstrating the power and insidiousness of state-produced stigma.

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Abbreviations and acronyms

CA	Carer's Allowance
DLA	Disability Living Allowance
DWP	Department for Work and Pensions
ESA	Employment and Support Allowance
ESA (SG)	Employment and Support Allowance (Support Group)
ESA (WRAG)	Employment and Support Allowance (Work-Related Activity Group)
IB	Incapacity Benefit
IRBs	Incapacity-related benefits
JSA	Jobseeker's Allowance
NEA	New Enterprise Allowance
PIP	Personal Independence Payment
SDP	Severe Disability Premium
UC	Universal Credit
LCW	Limited Capability to Work
WCA	Work Capability Assessment
WFIs	Work-Focused Interviews
YTS	Youth Training Scheme
PTSD	Post-Traumatic Stress Disorder

Overview of relevant benefits

Carer's Allowance (CA) is a benefit for people who spend at least 35 hours a week providing regular care to someone who has a disability. It was first established as Invalid Care Allowance in 1976. Prospective claimants must apply via an online or paper form. Most CA claimants are female. CA is paid weekly or every 4 weeks. It is not means-tested, but claimants in other employment must not earn over a certain threshold per week, and claiming CA affects entitlement to means-tested benefits.

Employment and Support Allowance (ESA) is a disability-related benefit for people who have limited capability for work because of their sickness or disability, usually paid every 2 weeks. ESA was introduced in 2008 for new disability benefit claims, and since 2011 those claiming existing disability benefits (namely Incapacity Benefit) have been switched on to ESA. Prospective claimants must apply via an online or paper form. To qualify, applicants must undergo a Work Capability Assessment (WCA) to determine their eligibility, following which they can be placed into a Work-Related Activity Group (WRAG) (where they can only claim ESA for up to a year) or a Support Group (SG). New-style ESA is not means-tested but is contributions-based only. Income-related ESA will eventually be phased out and replaced by Universal Credit, and the Severe Disability Premium (SDP) for disabled claimants living alone without a carer will be abolished.

Pension Credit (PC) is a means-tested benefit for people on a low income who are over State Pension age. This benefit is paid weekly. It was introduced in 2003 to replace the Minimum Income Guarantee (MIG). Prospective claimants must apply via an online or paper form.

Personal Independence Payment (PIP) is a non-means-tested benefit to support people with extra care or mobility needs as a result of a disability. It was rolled out from 2013 onwards to replace Disability Living Allowance (DLA) for people aged 16 or over. Applicants must complete an online or paper form and undergo a medical test to assess or reassess their eligibility, according to a points-based system for mobility and daily living domains. Those awarded an enhanced rate for mobility may be entitled to lease a vehicle via the Motability scheme (but eligibility has been dramatically reduced with the transition from DLA to PIP since 2013). It is usually paid every 4 weeks.

Universal Credit (UC) is a means-tested benefit, paid monthly, for people of working age who are on a low income. Prospective claimants must complete an online form. UC was rolled out from 2013 onwards for all new claims, to replace six means-tested benefits (Income Support; Income-based Jobseeker's Allowance (JSA); Income-related Employment and Support Allowance (ESA); Housing Benefit; Child Tax Credit; Working Tax Credit). All claimants on such 'legacy benefits' are scheduled to be moved on to UC by September 2024. Those claiming UC may be entitled to a carer's element, child element, housing costs element and a limited capability for work and work-related activity element following a Work Capability Assessment.

Chapter 1: Introduction

Stigma has remained a longstanding feature throughout the history of the British social security system, deliberately cultivated to ration welfare expenditure and govern those who seek support (Golding and Middleton 1982; Spicker, 1984; Page, 1984; Walker, 2014; Tyler, 2020). However, its mechanisms and manifestations have shifted over time and take a distinctive form in the current context of neoliberal austerity and unprecedented welfare reform, warranting continued scrutiny of the role of stigma in shaping claimants' engagements with the social security system, and shaping their lives more generally. In this context, we have witnessed the amplification of benefits stigma in political rhetoric, media narratives and public attitudes (Baumberg *et al.*, 2012; Taylor-Gooby, 2015; Clery, 2015; Baumberg, 2016; Tyler, 2020).

Furthermore, my focus on women's experiences stemmed from evidence pointing to the disproportionately gendered impacts of austerity and welfare reform on women (Reis, 2018a), arguably legitimated by the absence of women from policy design, despite their paradoxical overrepresentation as users of the state welfare system (Lister, 2000). Moreover, my research focus was motivated by my awareness of the persistent stigmatisation of the female poor (Song, 1996) and the ways such stigma is mobilised in the current era to justify punitive policy interventions (Tyler, 2008; Evans, 2016). Consequently, I saw a need to investigate stigma from a female perspective using a feminist approach.

This research project emerged from my desire to explore and critique welfare stigma in the contemporary era through centring the voices of those with lived experience of social security receipt. Earlier in the austerity era, I had undertaken research examining experiences of unemployment and benefits receipt among people living in Merseyside and Manchester, respectively, in my Undergraduate (2011-12) and Master's (2014-2015) dissertation projects. Upon starting the PhD, owing to the well-documented gender politics of welfare and poverty stigma, alongside the disproportionately gendered impacts of austerity and welfare reform, I soon narrowed my focus to examine women's experiences of stigma and social security receipt. In my Master's research I had struggled to recruit female participants as the main attendees of the job clubs where I recruited participants were male, so this was a perspective I had missed.

The life experiences documented within this thesis contrast starkly with popular portrayals of benefit claimants living a life of luxury at the taxpayers' expense - the lazy, workshy "benefit scrounger", the feckless "benefit mum" and the fraudster feigning a disability to avoid paid

work. Such 'abject figures' (Tyler, 2013, p.9) repeatedly constructed in the popular imaginary serve to make the decimation of welfare support and the introduction of increasingly punitive welfare policies appear fair and necessary. The research adds to existing evidence countering this perspective by highlighting the injustice and harm that such policies impose and illuminating the disconnects between powerful anti-welfare rhetoric and real lived experiences. Indeed, as argued by Tyler (2020, p.189), drawing attention to 'experiences in everyday contexts' and situating such experiences within a broader framework of stigma production, provides an essential means of countering stigma.

1.1 Theoretical context

Popularised in twentieth century Sociology by Goffman (1963), the concept of stigma has witnessed a recent sociological revival and reconceptualisation. Departing from its hitherto 'individualistic, ahistorical and apolitical' usage (Tyler, 2020, p.24), stigma has been redefined in structural terms as a productive form of classificatory power 'embedded within the social relations of capitalism' (Tyler, 2020, p.9). By this definition, stigma is deliberately cultivated by powerful groups to retain and accumulate political and economic power, and thus reproduce inequalities (Link and Phelan, 2001; Tyler, 2020). This can be applied to the longstanding stigma of poverty and benefits receipt in Britain (Walker, 2014), allowing an understanding of how stigma is crafted and mobilised in the present era to legitimise unprecedented welfare reform.

During the last decade, the UK has witnessed an amplification of benefits stigma in the form of negative media portrayals, divisive political rhetoric and hardening public attitudes towards welfare expenditure and claimants themselves (Baumberg *et al.*, 2012; Jensen and Tyler, 2015; Taylor-Gooby, 2015; Tyler, 2020). Notably, during this period, a hugely popular genre of documentary-style television programmes has emerged, termed 'poverty porn' by some due to it focusing on people living in poverty and claiming benefits as a form of voyeuristic entertainment (Jensen, 2014). Such programmes construct and reinforce classed and gendered stigma (Allen *et al.*, 2014) and function to 'embed new forms of commonsense about welfare and worklessness' (Jensen, 2014, p.277), making punitive welfare reforms appear morally justifiable.

Concurrently, the unprecedented austerity-driven reform of the social security system over the last decade has entailed successive cuts to provision, and the amplification and extension of

welfare conditionality and sanctioning to groups previously exempt, such as lone parents, the under-employed, those with young children, and disabled people (Dwyer and Wright, 2014; Webster, 2017; Grover, 2019). Such austerity-driven reforms disproportionately affect women (Reis, 2018a, 2018b; Alston, 2018), with gender inequalities intersecting with and compounding those relating to race (Hall *et al.*, 2017) and disability (Alston, 2018; Reis and De Henau, 2018; Ryan, 2019). Such processes of welfare reform and changes to benefit entitlement can be understood in terms of the extension and amplification of the institutional stigma already embedded in the benefits system historically, 'adding another layer' to the stigma of the benefit claiming process (Patrick, 2017a, p.154-155). Existing research has illuminated the role that stigma plays in legitimating and garnering public consent for such reforms (*inter alia* Jensen and Tyler, 2015; Shildrick, 2018; Tyler, 2020), as well as acknowledging the tendency of punitive reforms to reinforce degradation and stigma (Patrick, 2017a).

Qualitative research has been crucial in bringing the experiences of marginalised groups to the forefront and highlighting the sharp contrast between stigmatising rhetoric and everyday realities (*inter alia* Hamilton, 2012; Shildrick and MacDonald, 2013; Garthwaite, 2016; Patrick, 2016, 2017; Shildrick, 2018). Nonetheless, there is a shortage of research explicitly exploring experiences of stigma in the current context. An important aspect of existing research has been the emphasis on how stigmatised groups manage and resist stigma, including valuable insights about how mothers experience and cope with stigma (Hamilton, 2012; Shildrick and MacDonald, 2013; Pemberton *et al.*, 2016; Patrick, 2016). Indeed, rather than merely being 'passive recipients of stigma', scholars have pointed to the persistent tendency of stigmatised groups to develop forms of agency and stigma resistance using the resources available to them (Link and Phelan, 2001, p.378; Lister, 2004; Tyler, 2020). Nonetheless, stigma resistance remains an under-researched area of study warranting further exploration of how state-produced stigma is managed and resisted (Tyler, 2020).

Contemporary stigma scholarship highlights the continued need to investigate how stigma is experienced and challenged, particularly in the current context of widening inequalities, amplified stigma and ongoing welfare reform (Tyler, 2020). Furthermore, there is a shortage of empirical research with those most affected by such policy shifts; working-class and disabled women. This research therefore contributes to existing knowledge and fills this gap by exploring the dynamics of stigma among a varied group of women, some of whom are disabled,

highlighting how stigma and welfare reform affects their everyday lives. Furthermore, it adds understanding of stigma resistance and the possible limitations of micro-level resistance strategies.

1.2 Overarching research question and aims

This project sought to examine the dynamics of stigma and resistance in the lives of women who rely on benefits, in the context of a changing system and increased hostility towards benefit claimants. The overarching question was therefore, "*how does stigma manifest in the lives of women engaged with the social security system*". The aims of this research were to:

1. Explore the mechanisms of stigma operating in the lives of women claiming benefits
2. Examine the extent to which the benefits system's design and ongoing welfare reform shape and contribute to stigma
3. Understand how stigma manifests on an everyday level in social interactions and self-perceptions
4. Examine the ways in which such stigma is managed and resisted
5. Better understand the divisive politics of stigmatisation and stigma's function as a classificatory form of power in the contemporary era.

1.3 Main contribution and central argument

This research builds on existing research about the harmful impacts of recent welfare reforms for the lived experiences of benefit recipients (*inter alia* Garthwaite, 2016; Patrick, 2017a; Shildrick, 2018), particularly women and disabled people, and the lesser studied relationship of such reforms to the stigma that drives and legitimises them. This intersectional feminist analysis of stigma in the contemporary era presents a unique contribution to knowledge. The research aims to understand the dynamics of stigma and resistance in the current era, using the perspectives of women living in Merseyside in the North West of England, who are currently or intermittently claiming a range of means-tested and non-means-tested benefits, as a crucial source of knowledge.

Using empirical data from semi-structured, in-depth interviews, informed by a feminist epistemological, methodological and ethical approach, this thesis uncovers and examines the lives and benefit claiming experiences of this group, in the context of a changing system, and

against the backdrop of a persistent and increasing hostility in media, political and public discourse towards those who rely on social security support. The thesis findings demonstrate the centrality of stigma as a pervasive, divisive form of power driving, legitimating and amplifying inequalities based on gender, class and disability (Tyler, 2020). Institutionally-embedded stigma is shown to permeate every aspect of the system, from its design and accessibility, to the implementation of welfare policies and the forms of conditionality and punitiveness imposed. The system is demonstrated to be not only *based on* stigmatising assumptions, but to deliberately *inflict* such stigma onto vulnerable groups, adding weight to conceptions of austerity as a violent force (Cooper and Whyte, 2017b). Furthermore, the findings powerfully illustrate how state-orchestrated stigma bleeds into everyday interactions and self-perceptions in the current era, and the ways in which benefits stigma intersects with gender, class and disability. Another key contribution of the research is the insights offered about the resistance strategies and stigma responses employed by the women interviewed, which are shown to be contradictory and complex.

1.4 Thesis chapter outline

Chapter 2 is the initial literature review chapter, which situates and conceptualises stigma in order to provide a theoretical framework which informs how stigma is understood and researched in the rest of the thesis. The chapter explores the evolution of the concept of stigma within Sociology, tracing it from Goffman's (1963) seminal work, through to contemporary understandings which critique and build on Goffman. As will be discussed, such retheorisations have redefined stigma in a way that is highly influential for this thesis and provide the theoretical lens for understanding and researching the dynamics of stigma in the contemporary era.

Chapter 3, the second literature review chapter, applies the notion of stigma as a structural form of power to the phenomenon of benefits stigma. It does so through situating Britain's welfare regime within a broader historical and global context, tracing the interrelations between stigma and policy over time, from the 1601 Poor Law through to present day welfare reform. In doing so, it highlights historical continuities in the persistence of benefits stigma in British welfare provision, while also enabling an appreciation of the particular relevance of stigma today in the context of neoliberalism and austerity where punitive welfare reforms rely on stigma to manufacture public consent.

Chapter 4 critiques the welfare state through a gendered lens, drawing attention to the complex and mutually-reinforcing relationship between women and welfare, neglected in much post-war welfare analysis. Situating women's position within, and relationship to, the welfare state enables the critical exploration women's experiences of stigma in relation to benefits receipt in the context of increasing stigmatisation of people who claim benefits, and increasingly punitive welfare reforms which carry disproportionate impacts for women.

Chapter 5 outlines and justifies the methodology and methods adopted in this PhD project. It outlines the underlying philosophical assumptions of feminist epistemology guiding and underpinning the research; provides a reflective account of the research design, methodology and method of data collection and analysis; and discusses the ethical considerations and researcher reflexivity which shaped every stage of the research.

Chapter 6, the first of two findings chapters, illuminates the mechanisms of institutional stigma embedded within every stage of the process of claiming benefits in the contemporary era, highlighting the role of gender and disability in shaping experiences of stigma., using Tyler's (2020) framework of stigma theory to contribute to existing knowledge. Institutional stigma is understood as stigma occurring in the process of claiming benefits, due to its embeddedness in the design, administration and implementation of the social security system.

Chapter 7 presents findings on the stigma which manifests on an everyday level through social encounters and self-identities, illuminating intersecting experiences of stigmatisation related to claiming benefits, motherhood, disability, mental health, social class and place. This chapter also contributes to knowledge about a crucial and under-researched area of stigma scholarship; how stigmatised people respond to and resist stigma. As shown, responses to stigma are not always straightforward and consistent, but are complex and at times contradictory.

Chapter 8, the discussion and conclusion chapter, brings the thesis to a close. It firstly summarises the aims and core themes of the thesis, before bringing together the findings and evaluating their contribution to existing knowledge about stigma and the social security system, situating the research in relation to existing research in the field. The chapter concludes with a consideration of policy implications in light of the research findings, as well as possible avenues for future research.

Chapter 2: Conceptualising stigma: Goffman and beyond

2.1 Introduction

This chapter situates the concept of stigma academically, by tracing its sociological significance from Goffman's (1963) pioneering work, to contemporary understandings (most notably, Tyler, 2020), in order to provide a useful conceptual framework for understanding and researching stigma in this thesis. The chapter begins with Goffman's (1963) contribution to understandings of stigma, examining his definition of the concept and his discussion of the process of stigmatisation. It will then explore Goffman's (1963) interactionist approach to understanding the strategies utilised by stigmatised individuals to avoid and manage stigma, and the effects of stigmatisation when such attempts are unsuccessful. Here, the notion of stigma being internalised on a personal level into individual self-perceptions will also be examined. The chapter will subsequently assess the undeniable influence Goffman has had on the sociology of stigma, highlighting notable continuities between his work and more contemporary research, including extensions of his theoretical ideas.

The chapter then critiques Goffman's conceptualisation of stigma by highlighting the issues with its broad definition, and individualistic, apolitical and ahistorical focus (Link and Phelan, 2001; Scambler, 2009; Perez, 2014; Tyler 2015, 2020; Tyler and Slater 2018). Consequently, contemporary directions for the sociological understanding of stigma are then explored, with an emphasis on the need to acknowledge the role of power in the process of stigmatisation, redefining stigma in an overtly political manner as a form of power intentionally imposed on marginalised groups to legitimise and amplify social inequalities (Link and Phelan, 2001; Scambler 2009; Tyler, 2020). As will be argued, such an understanding still enables attention to be paid to everyday experiences of stigmatisation and resistance similar to those discussed by Goffman (1963), but crucially it means that such experiences can be located within and understood in reference to the broader structural and historical frameworks of inequality. Finally, the chapter will apply this conceptual understanding of stigma to the longstanding stigma attached to poverty and social security receipt, which is then explored in depth in chapter 3 of this thesis.

2.2 Goffman's contribution

The concept of stigma is most notably associated with sociologist Erving Goffman (1963), whose pioneering work systematically appraised and consolidated existing work on stigma in

social psychology into a coherent conceptual framework, transforming sociological understandings of stigma and its impact on the individual and society. Using a wide range of examples of social situations in which the stigma can be observed and applied, Goffman (1963) for the first time provided a comprehensive definition of the concept, an insight into the social dynamics at play in the process of stigmatisation, the techniques employed to respond to and negotiate stigma, and an understanding of the consequences of stigmatisation. This section will therefore firstly explicate Goffman's (1963) definition of stigma before discussing his understanding of stigma as a dynamic social process. The section will then discuss Goffman's (1963) understanding of the strategies devised by stigmatised individuals to manage, respond to and reject stigma, followed by a discussion of the importance of various support networks in helping stigmatised people to cope. The section will then examine Goffman's (1963) understanding of the tendency of individuals to internalise stigma, affecting their self-conceptions and identities.

2.21 Definition

Stigma broadly refers to a mark of disgrace, though usage has shifted from a literal meaning to the more symbolic and figurative social meaning commonly used within the sociology of stigma (Goffman, 1963; Tyler, 2020). Indeed, according to Goffman (1963), the term stigma was originally used in Ancient Greece in a literal sense, to refer to *actual* marks carved or branded on to the skin as a shaming form of punishment, leaving behind an indelible signifier of a person's social and moral disrepute or low social standing. Such 'bodily signs', would serve to make it publicly known that the 'blemished person' was 'a slave, a criminal, or a traitor' (Goffman, 1963, p.1). Goffman (1963, p.1) noted that while today's usage of the term stigma has a similar meaning to its original usage in that it refers to the situation of a 'marked' person, it places emphasis on the *social* element of the shame itself, rather than to the *physical* evidence of it.

Using this social rather than physical understanding of the concept, Goffman (1963, preface) defined stigma as the condition of an individual who is 'disqualified from full social acceptance', owing to their possession of an attribute that is deemed negative and incompatible with dominant societal norms and expectations. Goffman (1963) identified three very different primary typologies of stigma. Firstly, he identified stigma stemming from 'abominations of the body' (Goffman, 1963, p.4), for instance, visible physical abnormalities and disabilities. Secondly, he suggested that stigma can be based on perceived 'blemishes of individual

character' and morality, owing to a known history of afflictions such as, 'mental disorder, imprisonment, addiction, alcoholism, homosexuality, unemployment, suicidal attempts, and radical political behaviour' (Goffman, 1963, p.4). Thirdly, Goffman (1963, p.4) identified 'tribal stigma of race, nation and religion'. Despite the differences in the usage of the concept, Goffman (1963, p.5) contended that all instances of stigma, including the Greek usage of the term, have common 'sociological features'; an individual possesses an 'undesired differentness' that attracts, or has the potential to attract negative attention, outweighing the significance of other characteristics that they may have in their claim to a 'normal' identity, thus setting the stigmatised apart from 'the *normals*', who do not diverge negatively from given social expectations.

2.22 Stigma as a dynamic social process

Informed by a social interactionist approach, Goffman's (1963) understanding of stigma placed a heavy focus on the everyday, micro-level social encounters in which he argued stigma emerged. The process of stigmatisation was argued to stem from society's tendency to classify people into categories, and, in doing so, establish boundaries between the sorts of characteristics deemed 'ordinary and natural', versus deviant and stigmatised, for members of each category (Goffman, 1963, p.2). Such categories and boundaries are said to be reinforced through social settings and institutions, and the development of expected 'routines' of social interaction within given settings (Goffman, 1963, p.2). According to this model, people learn quickly and usually unconsciously to categorise strangers in everyday social encounters by making assumptions about their personal and structural characteristics, and thus anticipating their 'social identity' (Goffman, 1963, p.2). In doing so, we construct a '*virtual social identity*' (Goffman, 1963, p.2, emphasis in original) in our minds of how a given person ought to be. However, Goffman (1963, p.3) argued that if a stranger is subsequently proven to possess an attribute that negatively sets them apart from 'others in the same category of persons available' to them, the person is then 'reduced in our minds from a whole and usual person to a tainted, discounted one' (Goffman, 1963, p.3). The attribute therefore constitutes a blemish or *stigma* on the person's social identity, owing to both its undesirability and its incompatibility 'with our stereotype of what a given type of individual should be' (Goffman, 1963, p.3). Stigma therefore exists as a 'special discrepancy between virtual and actual social identity' (p.3) and 'a special kind of relationship between attribute and stereotype' (Goffman, 1963, p.4).

Consequently, according to Goffman (1963, p.3, my emphasis), in conceptualising stigma, 'a language of *relationships*' rather than of attributes, is required as an attribute is never inherently stigmatising. Instead, the assignment of stigma is argued to be dependent on contextual factors such as the social status of the individual possessing such a trait; accordingly, 'an attribute that stigmatises one type of possessor can confirm the usualness of another' (Goffman, 1963, p.3). Likewise, the stigma attached to certain attributes also varies according to the social context and the norms and values considered acceptable within that group or setting, for example the decision to hide or disclose the possession of higher educational qualifications might vary according to the context, as may the decision whether to divulge having an illness or disability (Goffman, 1963, p.3). Hence, according to Goffman (1963, p.4), no characteristic or behaviour is intrinsically socially discreditable, nonetheless he also pointed out that there are notable attributes which are deemed as shameful in all social contexts, and among all social groups.

Interestingly, Goffman (1963, p.4) also identified a 'double perspective' at play in the manifestation of stigma; a distinction between the '*discredited*' and the '*discreditable*'. In the case of the discredited, the individual's 'differentness' is visible or easily discernible, and therefore obvious to those around them, whereas in the case of the discredit*able*, the stigmatising quality is *not* immediately visible or known about, hence the individual continually faces the risk of becoming discredited. This distinction between discredited and discreditable stigma was believed by Goffman (1963) to influence the sorts of techniques employed by stigmatised individuals to manage or avoid stigma, as will be discussed in the next section.

According to Goffman (1963), the ascription of stigma can have far-reaching effects on the individual and their social standing. Indeed, the stigmatised individual is 'by default' believed by the majority of society to be 'not quite human', leading to and legitimising further forms of discrimination which deeply affect the 'life chances' of the stigmatised individual (Goffman, 1963, p.5). This discrimination is exercised through the crafting of a 'stigma-theory, an ideology to explain his inferiority and account for the danger he represents', which in turn can justify further prejudice unrelated to, but by virtue of, the original stigmatising feature, whereby other people 'tend to impute a wide range of imperfections on the basis of the original one' (Goffman, 1963, p.5). Goffman (1963, p.5) also highlighted the power of language in reinforcing stigma; 'we use specific stigma terms such as cripple, bastard, moron in our daily discourse as a source of metaphor and imagery, typically without giving thought to the original

meaning'. As will be discussed in section 2.3, aspects of Goffman's (1963) definition of stigma and analysis of the process and consequences of stigmatisation still have relevance and influence today. The chapter now turns to Goffman's assessment as to how individuals and groups seek to avoid and negotiate stigma to prevent their identities from becoming spoiled.

2.23 Avoiding, managing and responding to stigma

A central and influential aspect of Goffman's (1963) work was his discussion of the day-to-day strategies of identity management employed by stigmatised individuals and groups to minimise the damaging social and psychological consequences of their possession of a discrediting characteristic, either through carefully managing information, or managing impressions. Here Goffman (1963, p.13) was particularly interested in people's behaviour during the micro-level social interactions that occur between the stigmatised and 'normals'; he saw these 'moments' as 'one of the primal scenes of sociology', where 'the causes and effects of stigma must be directly confronted on both sides'. This reflects Goffman's (1959, 1961, 1967) interest in symbolic interactionism and the structure of social interactions in sustaining the social order. Goffman (1959, 1961, 1963) was interested in how individuals continually manage impressions of the 'self' in different settings, like actors on a stage, to avoid being discredited, but also how the perceived credibility of such performances is influenced by power and patterns of social control.

During such interactions, Goffman (1963) highlighted that different levels or types of stigma evoke different strategies of identity management. Goffman (1963, p.48) argued that the stigmatised may, where possible, carefully attempt to control the perceptibility of any markers of stigma in order to 'pass' as 'normal'. However, he noted that this can have varying levels of success depending on the 'visibility' (Goffman, 1963, p.48) and 'obtrusiveness' (p.49) of their stigma (p.49), the contexts in which their stigmatising attribute will limit them, as well as the 'decoding capacity of the audience' (p.51). In the case of the *discreditable*, whose stigma is *not* readily visible or evident to 'normals', such individuals may attempt at 'passing' as 'normal' (Goffman, 1963, p.42) through the careful management of 'social information' conveyed to others through 'symbols' (Ibid., p.43). Such symbols conveying social information were argued to come in a variety of forms; some may be 'congenital', such as physical indications of a person's racial or ethnic group or, if not, then they may become permanent once employed, for example, a scar or tattoo, while some may be 'neither congenital nor permanent', such as the adoption of different styles of dress or appearance (Goffman, 1963,

p.46). Likewise, some such symbols may be *intentionally* adopted solely to convey particular social information which might confer social status, while other symbols may be present for other reasons, for example, marks on the arms of drug addicts (Goffman, 1963). Moreover, such information can also be conveyed by a person's conduct and who they associate with (Goffman, 1963). While some symbols may merely convey expected and unremarkable information about a person's social identity, certain signifiers can convey social information implying the special status of their bearer; 'prestige symbols' (Ibid., p.43). Contrastingly, '*stigma symbols*' (Goffman, 1963, p.43) are signs which draw attention to a shameful 'identity discrepancy' (p.43-4) between what they ought to be, their virtual social identity, and their actual social identity. Goffman (1963, p.44) uses the example of the habitual mispronunciation or usage of a word by somebody who is attempting to appear middle-class; this may constitute a stigma symbol that threatens to expose their true identity. Furthermore, Goffman (1963, p.44) points to *disidentifiers* which may be utilised by stigmatised people to intentionally fragment and disrupt the stereotypical image that others may have about people with a stigmatising characteristic such as theirs.

Goffman (1963) highlighted that the meaning of symbols is variable between different social groups, and that some symbols may be unreliable and convey incorrect information about a person. He also pointed out that in addition to 'signs which routinely convey social information', as is the case for many prestige symbols, stigma symbols and disidentifiers, there is also what he termed 'fugitive signs that have not been institutionalized as information carriers' (Goffman, 1963, p.45). When fugitive signs successfully 'make claims to prestige', they can be referred to as 'points', whereas 'when they discredit tacit claims', they can be referred to as 'slips' (Ibid., p.45). Strategies of 'information control' (Goffman, 1963, p.41) therefore include continual decisions as to whether 'to display or not to display; to tell or not to tell; to let on or not to let on; to lie or not to lie; and in each case, to whom, how, when, and where' (p.42). Alternatively, stigmatised individuals may opt to 'voluntarily disclose' their stigmatising characteristic, perhaps owing to the difficulty of continually concealing it, either verbally or by wearing a stigma symbol (Goffman, 1963, p.100).

Unlike *discreditable* individuals, whose stigma is less easily perceptible, for *discredited* individuals, their stigmatising attribute is readily apparent during 'mixed contacts' with 'normals' (Goffman, 1963, p.14). Goffman (1963, p.41) highlighted that such situations may be 'tense, uncertain and ambiguous' for all involved, as the stigmatised individual is likely to

feel uncertain as to how they will be defined and perceived, while 'normals' may be conscious of paying 'careful disattention' to the discrediting characteristic. Hence, discredited individuals must employ strategies to manage this tension. Nonetheless, the uncomfortable nature of such social interactions may cause the stigmatised individual to organise their lives in such a way as to avoid the 'anxious unanchored interaction' with 'normals' where possible (Goffman, 1963, p.18), resulting in self-isolation. Alternatively, Goffman (1963, p.102) highlighted that discredited individuals, for whom passing techniques would be futile, may use '*covering*' techniques in an attempt to reduce the obtrusiveness and detract attention from their obvious stigmatising trait, and thus 'reduce tension' during mixed social interactions, for example, the use of a noticeably prosthetic limb to conceal a missing limb.

2.24 The importance of support networks

In addition to attempts to hide or avoid stigma, Goffman (1963) highlighted the importance of support networks for stigmatised people in alleviating the pain and exclusion brought about through stigmatisation. He noted that, where possible, the support of people who share the same stigma can aid the stigmatised person in gaining a feeling of acceptance among a group of 'sympathetic others' who are 'ready to adopt his standpoint and share with him the feeling that he is human and "essentially" normal in spite of appearances and in spite of his own self-doubts' (Goffman. 1963, p.20). Hence, the company of what he called the '*own*' (Ibid., p.19, emphasis in original) may encourage stigmatised people to occupy a 'half-world' (Ibid, p.21) and protect themselves from the outside world of 'normals'. Taking this further, Goffman (1963, p.6) acknowledged the ability of a small minority of stigmatised groups to reject or remain altogether unaffected by the stigma placed upon them. Indeed, nonconformist groups who abide by an alternative system of cultural norms and values to the majority of society may *reject* the norms and values that lead to their stigmatisation, and thus not be affected by the stigma assigned to them; 'insulated by his alienation, protected by identity beliefs of his own, he feels that he is a full-fledged normal human being, and that we ['normals'] are the ones who are not quite human' (Goffman, 1963, p.6). Nonetheless, Goffman (1963) regarded this apathy to stigmatisation as unusual, and emphasised that the vast majority of people in a given society share the same beliefs and values about acceptance and identity.

In addition to the support that stigmatised people may gain from people who share their stigma, Goffman (1963, p.28) also highlighted the importance of a group he called 'the wise' in providing social support. The 'wise' were defined as trusted 'normals' who are 'privy to the

secret life of the stigmatized individual and sympathetic with it' and are thus permitted 'a measure of courtesy membership into the clan' (Ibid. p.28). The 'wise' group include professionals who work with those possessing a particular stigma, and those who are related to a stigmatised person. Consequently, once the 'wise' individual has gained their trust, the stigmatised person can then be in their presence without any feelings of shame or need to exert stigma management strategies that are normally employed in the presence of 'normals' (Goffman, 1963). For those with a close relationship to a stigmatised individual, Goffman (1963, p.30) highlighted the risk of what he termed 'courtesy stigma', where stigma has a tendency to transmit outwards from the stigmatised person to those they have close connections or associations with. Goffman (1963, p.30) argued that this can have a variety of effects, including the severing or avoidance of such relationships, the demonstration of a 'model of "normalization" of stigmatised people to 'normals', showing how they should be treated, and also the possible unintended effect of making 'both the stigmatized and normal uncomfortable' due to 'always being ready to carry a burden that is not "really" theirs' (p.31).

2.25 The internalisation of stigma

Despite the attempts to avoid and manage the negative consequences of stigma, and rely on others for support, Goffman (1963) highlighted the tendency for individuals to internalise stigmatising ideas, thus affecting their self-perceptions. Indeed, rather than holding different beliefs and values to the 'normals', he argued that stigmatised individuals are generally socialised to view identity the same way and share a common conception of what constitutes "a normal person" (Goffman, 1963, p.7). Consequently, through 'learning and incorporating the standards against which they fall short' (Ibid., p.32), stigmatised people tend to be acutely aware of how inadequate they may appear to others as a result of their stigmatising attribute. Thus, the stigmatised person is likely 'if only for moments, to agree that he does indeed fall short of what he really ought to be', resulting in feelings of 'shame' (Goffman, 1963, p.7). Moreover, according to Goffman (1963, p.7), such feelings of 'self-hate and self-degradation', based on a disjuncture between 'self-demands' and the self, are likely to occur not only in the company of 'normals', but also when the individual is alone. For example, in the case of physical defects caused by spinal tuberculosis, a sufferer may look at their own reflection and feel a sense of identity confusion between self-expectations and reality; 'my disguise had been put on me without my consent or knowledge…and it was I myself who was confused by it, as to my own identity' (Hathaway 1943, p.41, cited in Goffman, 1963, p.8). Furthermore, the

denial of 'respect and regard' that stigmatised people may suffer as a result of a discrediting characteristic (Goffman, 1963, p.8), may have a cyclical effect on their own self-conception, where the stigmatised individual 'echoes this denial by finding that some of his [sic] own attributes warrant it' (p.9). Hence, stigmatised people may internalise and believe stigmatising ideas about themselves and their specific condition or attribute, and interpret their own self-identities in light of these ideas. Goffman (1963, p.6) also noted that where stigmatised people adopt a 'defensive response' to their situation, this may act as a self-fulfilling prophecy and may have a cyclical effect on their social inclusion as 'normals' may perceive their defensiveness as a direct manifestation of their defect or stigmatising attribute 'and hence a justification' for subsequent discrimination and ill treatment (p.6).

Efforts to 'correct' stigmatising characteristics may therefore be conceived as a result of the internalisation of stigmatising ideas, for instance, 'when a physically deformed person undergoes plastic surgery, a blind person eye surgery, an illiterate remedial education, a homosexual psychotherapy' (p.9). Nonetheless, such attempts at correction may not have the desired effect in enabling the individual to acquire 'a fully normal status, but a transition of self from someone with a particular blemish into someone with a record of having corrected a particular blemish' (p.9), hence the memory of the stigma still haunts them.

2.3 Influence and legacy of Goffman

2.31 Basic definition and application

Goffman's (1963) pioneering exposition of the concept of stigma has been undeniably influential, and pivotal in the development of the sociology of stigma (Kusow, 2004; Bos *et al*., 2013; Tyler, 2014a; Tyler and Slater, 2018; Tyler, 2020). Firstly, Goffman's treatise popularised the concept and prompted an unprecedented profusion of work on stigma in the decades following its publication (Link and Phelan, 2001; Bos *et al*., 2013). Indeed, mentions of the term *stigma* in titles or abstracts in journals such as PsychInfo and Medline, saw a marked increase since the publication of Goffman's (1963) work, particularly during the 1980s and 1990s (Link and Phelan, 2001). Consequently, Goffman (1963) can be seen to have sparked a plethora of subsequent sociological interest into the nature, origins and outcomes of stigma (Link and Phelan, 2001). Upon examining sociological explorations into stigma since Goffman, there are evident continuities and areas of agreement between Goffman's (1963) conception of stigma, and that of more contemporary understandings. Indeed, according to

Link and Phelan (2014, p.76), 'it is difficult to find any current consideration of the concept that is not foreshadowed' by Goffman in some way.

Following Goffman (1963), the concept of stigma has been consistently conceptualised in a similar manner, as a discrediting characteristic, which has the effect of reducing an individual's status in the eyes of the wider society, and this stigmatisation has been consistently conceived as a dynamic social process, enacted and reified through social interactions (*inter alia* Crocker *et al.*, 1998; Link and Phelan, 2001; Weiss *et al.*, 2006). The basic framework of Goffman's conceptualisation of stigma has been applied to an ever-expanding range of social groups and circumstances, from a vast array of health conditions including epilepsy (Scambler and Hopkins, 1986), HIV and AIDS (Alonzo and Reynolds, 1995; Scambler and Paoli, 2008; Pryor and Reeder, 2011), autism (Gray, 2002) and mental illness (Link, 1987; Ahmedani, 2011; Scambler, 2012; Link and Phelan, 2014), to homelessness (Snow and Anderson, 1987), poverty (Walker and Chase, 2015), voluntary childlessness (Park, 2002), and 'deviant' occupations such as sex work (Scamber and Paoli, 2008) and topless dancing (Thompson and Harred, 1992; Thompson *et al.*, 2003). In addition to the wide theoretical application of Goffman's (1963) understanding of the nature and experience of stigma, it has also been successfully applied on a *practical* level in terms influencing the development of campaigns intended to alleviate the social stigma of health conditions like HIV and AIDS, and in policy development and activism in fields like mental health and disability (Tyler, 2015). Despite important distinctions from Goffman's work which are discussed in section 2.4, such theoretical and practical applications broadly align with two of the key categories of stigma identified by Goffman (1963) stigma by virtue of bodily abnormalities, or of possession of attributes which infer poor moral character.

Moreover, Goffman's (1963) conception of stigma has been extended and developed so that in addition to being applied to people and groups, it is applied to places and their residents where a powerful spatial stigma is seen to act as a unique form of stigma in its own right (Hastings, 2004; Wacquant, 2007, 2008, 2009; Hancock and Mooney, 2012a; McKenzie, 2015; Slater, 2015). According to Wacquant (2007), stigma attached to place, what he terms *territorial stigmatisation*, adds a further category of stigma not acknowledged by Goffman (1963), but in some ways follows on from Goffman's conceptualisation. Indeed, while Wacquant's (2007) conception of spatial stigma understands it in terms of possessing its own unique qualities that diverge from Goffman's understanding of stigma, he also conceives it as exhibiting similar characteristics to the main types of stigma identified by Goffman. Wacquant (2007) notes that

of the three main categories of stigma identified by Goffman, stigma attached to place is most similar to the third type, 'tribal stigma of race, nation and religion' (1963, p.4), as it tends to affect all members of a family and can be transmitted across generations. Furthermore, in addition to drawing upon the types of stigma identified by Goffman, Wacquant (2007, p.68) understands *territorial stigmatisation* as posing similar 'dilemmas of information management, identity and social relations' as those identified by Goffman (1963). Hence, Wacquant (2007) draws upon influential aspects of Goffman's (1963) work, namely around the stigma management techniques employed by stigmatised people, to contribute towards his understanding of the defamation of particular places and the consequences this may have for the residents of such places. Despite the influence of Goffman (1963) in such ideas, there is, however, a crucial departure from Goffman in that contemporary stigma theories place far more emphasis on the structural *production* of stigma. This is explored in more depth in section 2.4.

2.32 Dynamics of stigma

Moreover, in addition to agreement over the basic conceptualisation of stigma and the forms it can take, there has been consistent agreement in the sociology of stigma regarding the relative and context-dependent nature of stigma (Scambler, 2009). Just as Goffman (1963) emphasised stigmatisation to be a dynamic process, dependent on the wider social, economic and cultural context in which it occurs, rather than being static or inherent, subsequent sociological research into stigma has mirrored this understanding. For example, in terms of the stigma attached to unemployment, this has been found to fluctuate according to the economic context, where the stigma decreases during periods of widespread recession and high unemployment, owing to the attribution of blame being placed on external, structural factors, rather than on individual shortcomings (Kelvin and Jarrett, 1985; Biewen and Steffes, 2008; Brand, 2015).

Furthermore, another influential aspect of Goffman's (1963) work is his understanding of stigma as a complex and multidimensional phenomenon, operating on multiple levels, rather than merely working in a simple, uniform fashion. This is apparent in his distinction between *discredited* (overt) stigma, *discreditable* (hidden) stigma, his acknowledgement of internalised stigma and his discussion of 'courtesy stigma' (p.30). Subsequent sociological work into stigma has built upon this notion of multiple levels of stigma, using empirical research to provide more a rigorous and nuanced understanding. Goffman's (1963) distinctions between overt and hidden stigmas can be seen to have influenced Scambler and Hopkins' (1986, p.33) sociological research on the stigma of epilepsy, as they identified two levels of stigma,

'*enacted*' and '*felt*', as part of what Scambler (1989, p.445) termed a 'hidden distress model' of stigma. According to this typology, stigma can manifest itself through external, '*enacted*' stigma in the form of overt discrimination on the basis of a discrediting characteristic, rather like that which affects *discredited* individuals in Goffman's (1963) conception. '*Felt*' stigma, on the other hand, is less straightforward, referring to a continual feeling of anticipation and fear at the prospect of encountering enacted stigma, as well as an internalised 'feeling of shame', owing to their possession a particular disreputable characteristic that contravenes dominant conceptions of a 'normal' social identity (Scambler and Hopkins, 1986, p.33). Hence, respondents were found to have a profound sense of an '*ontological (*rather than moral)' deficit (ibid, p.33). Felt stigma can be seen to have affinity with Goffman's conception of *discreditable* stigma in that, discreditable individuals are continually at risk of their shameful characteristic being discovered, for fear that they will be discriminated against, and used techniques of 'secrecy and concealment' to ''pass' as normal' where possible (ibid., p.33). The hidden distress model asserted that felt stigma was more damaging to epilepsy sufferers than enacted stigma, because sufferers would conceal their condition from other people for fear of being overtly stigmatised, and it affected nine out of ten respondents, rather than a third experiencing enacted stigma.

This 'double perspective' (Goffman, 1963, p.4) at play in the manifestation of stigma, where it is seen to operate on two main levels, on an external, public level, and an internal, personal level, has also been reflected in other subsequent research on stigma, including distinction between 'social' and 'self-stigma' (Ahmedani, 2011, pp. 4-6), 'public' and 'self-stigma' (Corrigan *et al*., 2009, p.75), and 'stigmatisation' and 'personal stigma' (Baumberg, 2016, p. 183). Moreover, Alonzo and Reynolds (1995) identified a 'stigma trajectory' in stages of HIV stigma, thus building upon the idea of stigmatisation as a complex and multidimensional social process, as proposed by Goffman (1963). Additionally, Goffman's concept of 'courtesy stigma' (1963, p.30), whereby those closely associated with stigmatised people also feel a sense of shame by association, has been reflected in subsequent sociological and social-psychological research, particularly in the context of health conditions such as Alzheimer's disease (MacRae, 1999); autism (Gray, 2002) and schizophrenia (Angermeyer *et al*., 2003).

2.3.3 Subsequent research on stigma resistance

Another influential aspect of Goffman's (1963) work was the notion of responses and resistance to stigma; his work highlighted the multiplicity of techniques utilised by the discredited and discreditable to avoid or combat stigma. This idea that stigmatised people do not merely accept the stigma applied to them but attempt to negotiate and respond to it has been explored further since Goffman (1963), but still remains relatively unexplored. Indeed, in their research into the stigma associated with HIV and AIDS among female sex workers, Scambler and Paoli (2008, p.1851) identified a third type of stigma in addition to enacted and felt; what they called 'project stigma'. This term was used to refer to the 'positive strategies' used by 'people with troublesome identities, ascribed or achieved', to 'respond to these identities without either internalizing cultural norms of shame or blame, or becoming fearful, defensive or subdued by prospects of discrimination' (ibid., p.1851). Such strategies, according to Scambler and Paoli's (2008) terms, constituted the 'projects' of stigmatised people.

Moreover, McKenzie's (2015) ethnographic research in the stigmatised housing estate of St. Ann's in Nottingham, revealed the powerful role of community and family networks in creating a strong collective sense of identity and 'belonging' (p.76) within the cultural milieu of the estate, which helped residents cope with externally-imposed stigma. Additionally Kusow's (2004) research with Somali immigrants in Canada revealed the use of highly innovative strategies to respond to and reject stigma based on their skin colour. They tend to 'avoid social interactions with the majority group' (ibid. p.189), which reflects Goffman's (1963) ideas about the responses of certain stigmatised groups, and the importance of support networks within such groups. Indeed, Kusow (2004, p.189) found that the stigmatised Somali immigrants created 'a separate system of honor', and thus a rejection of the cultural norms which shape their stigmatisation; this alternative system of norms and values encompassed a rejection of Canadian identities (p.190), and a rejection of 'color-based discrimination' (p.191). Additionally, Kusow (2004, p.179) highlighted that Somali immigrants also respond to stigma by utlilising techniques of 'reverse stigmatization' and 'counter-devaluation', imposing their own version of stigma upon those that stigmatise them, based on the idea of cultural and moral superiority. Kusow's (2004) findings arguably challenge Goffman's 'tacit assumption that stigma processes are embedded in a single normative order' (p.195), and instead highlight the 'social and structural conditions that shape those processes of identity management' (p.195). Indeed, Kusow (2004, p.179) questions Goffman's assumed existence of a shared 'normative

order' assumptions in Goffman's conception of stigma and the idea that the majority of people, stigmatised and normal, hold the *same* values and beliefs.

2.4 'Moving beyond' Goffman's individualistic approach: Contemporary directions in stigma research

Despite the obvious influence that Goffman (1963) has had on subsequent sociological work into stigma, his work has undergone significant critique and development in recent years. While the wide applicability and application of Goffman's (1963) conception of stigma can be conceived in positive terms as a measure of its influence, his definition has been criticised for being overly broad, vague, and thus lacking conceptual clarity (Link and Phelan, 2001; Manzo, 2004; Perez, 2014). Furthermore, its fragmented application in 'separate domains' of research, typically focusing on 'single outcomes', arguably obscures the understanding of stigma as being central in the production of social inequalities (Hatzenbuehler *et al*., 2013, p.813).

An *essential* component emphasised in recent definitions of stigma but not explicitly addressed by Goffman (1963) owing to his particular interest in micro-level interactions, is that for stigmatisation to take place, *power* must be exercised (Link and Phelan, 2001; Scambler, 2004; Wacquant, 2008; Scambler, 2009; Tyler, 2020). Such power has been conceived as 'social economic and political' (Link and Phelan, 2001, p.375), and concerning the wider social structure in which stigma is created and reinforced. Indeed, Scambler (2009, p.451) notes that 'cultural norms of shame and blame and the labelling processes with which they are bound up never exist in a structural vacuum but invariably arise' within a particular set of social relations, structured by the inequitable distribution of power, for instance in terms of social class, gender and ethnicity. Hence, cultural norms of shame that ordain the assignment of stigma are generally seen to correlate with the structural 'fault-lines', or divisions, of society (Parker and Aggleton, 2003; Deacon and Stephney, 2007; Scambler, 2009; Tyler, 2020). This contemporary emphasis on the importance of power in determining the distribution of stigma is an important departure from Goffman's work, which has been criticised for its heavy focus on the *stigmatised* rather than the stigmatiser, and on the individual, rather than the broader social-structural conditions in which stigmatising ideas are formulated (Everett, 2004; Scambler, 2009; Link and Phelan, 2001; Perez, 2014; Pescosolido and Martin, 2015).

The individual focus within Goffman's (1963) conception of stigma has been seen as problematic in terms of its 'personal tragedy approach' to stigma which frames the stigmatised

as ‘victims’ (Scambler, 2009; Perez, 2014; Pescosolido and Martin, 2015). Furthermore, its narrow ‘normative inclusive logic’ is argued to actually reproduce stigma, rather than combat it, in that it casts stigmatised groups as lacking agency (Tyler, 2015, para. 7). This critique has led to some anti-stigma campaigns such as the National Institute of Mental Health and the Substance Abuse of Mental Health Service Administration preferring the term ’discrimination’ to ‘stigma’ because it shifts emphasis from the stigmatised and onto the stigmatiser (Pescosolido and Martin, 2015, p.88).

Contemporary stigma research has therefore moved beyond Goffman’s individualistic, apolitical focus to instead emphasise the role of powerful groups in the process of stigmatisation. Tyler’s (2020) work has been the most notable in this regard; she has retheorised stigma in a ‘distinctly political register’ (p.8) as a multidimensional form of power. This reconceptualisation allows a critical understanding of the structural processes through which stigma is *intentionally* crafted and reproduced, or what Tyler (2020, p.89) terms ‘stigmacraft’. Tyler’s (2020, p.260) metaphor of the ‘stigma machine’ refers to the interconnected mechanisms of stigma which work together to serve the function of amplifying, legitimising and reproducing social inequalities for the benefit of powerful political and media forces. This reconceptualisation of stigma can be applied to poverty and benefits receipt, where stigma is constructed by government and media forces to justify welfare retrenchment and increasing punitiveness, while securing public consent for such reforms (Jensen and Tyler, 2015; Tyler, 2020). In this context, the ‘stigma machine’ (Tyler, 2020, p.260) operates through the design and implementation of government policy, political discourse, media narratives and representations and everyday social interactions. Using this critical understanding of structurally-produced stigma as its starting point, the next chapter will situate and explore the topic of benefits stigma in Britain.

2.5 Conclusion

Overall, Goffman’s work can be seen as essential in foreshadowing contemporary sociological understandings of stigma. His work is highly important as a starting point for understanding how stigma manifests itself through social interactions, and how it is experienced and managed. In this sense, Goffman’s analysis ‘retains its insight, subtlety and acuity’ (Scambler, 2009, p.442), as many of his ideas regarding the experiences of those with spoiled identities are still relevant for stigma research today. Nonetheless, it may be ‘time to move on’ from, ‘or rather *beyond*’ Goffman (Scambler, 2009, p.442; Tyler, 2020), as the emphasis placed on the micro-

level, individual social interactions in Goffman's work, arguably places too little focus on the wider structural issues at play, and the power relations that shape the assignment and longevity of particular stigmas. Consequently, I examine stigma on an individual level, in terms of its effects on people's lived experiences and social interactions, but also look at the broader structural context, including the impact of gender, class and place, and the role of media and political rhetoric in shaping the experience of stigma. Tyler (2020) highlights that research into stigma is particularly pertinent in the contemporary context of escalating inequalities, austerity and neoliberalism. Stigma has witnessed a recent sociological revival and reconceptualisation, whereby the concept has been redefined in structural terms as a pervasive and productive form of classificatory power 'embedded within the social relations of capitalism' (Tyler, 2020, p.9). (Tyler, 2020, p.24), Theorising stigma in a 'distinctly political register' (Tyler, 2020, p.8) as a multidimensional form of power, enables a critical understanding of the mechanisms and sites through which stigma is intentionally crafted and reproduced. Stigma as not just an abstract theoretical concept, or merely an individualised experience, but a complex social process serving the function of legitimising and amplifying inequalities (Tyler, 2020).

Chapter 3: Situating contemporary benefits stigma

3.1 Introduction

Stigma has remained a longstanding feature embedded within British social security provision, with its roots evident in early attempts to manage and mitigate against poverty. This stigma has persistently revolved around moral distinctions between the supposedly deserving and undeserving poor, with this divisive ideology guiding and reinforcing policy decisions at different points in time (Golding and Middleton, 1982; Walker, 2014). This chapter situates British welfare provision and the associated concept of stigma within a broader global and historical context, which lays the foundation for conceptualising and researching benefits stigma in Britain today. The first main section of this chapter locates Britain's welfare regime in a global perspective, beginning with an explanation of Esping-Andersen's (1990) typology of modern capitalist welfare regimes as a framework for understanding how welfare states differ. It firstly outlines the key factors that are said to characterise and distinguish modern capitalist welfare states, before discussing each of the three regime-types – liberal, conservative and social democratic – in turn. This global comparison of welfare regimes provides a basis for examining the British system and the impact of economic, social and political factors on key policy shifts.

Accordingly, the second section of the chapter traces the historical trajectory of British welfare provision and the role of stigma in shaping and legitimating policy shifts. It begins with a discussion of early interventions, with a particular focus on the institutionally-embedded stigma evident in the workhouse system, especially following the 1834 Poor Law Amendment Act. The chapter then discusses the creation of the post-war welfare state, its attempts to reduce stigma and the possible limitations of this. The pivotal role of neoliberalism in reinvigorating benefits stigma is then discussed, beginning with Thatcher's government, through to the present-day austerity era. Tracing such changes to the neoliberal turn, this section highlights the unprecedented nature of welfare reform under austerity, legitimised by the stigmatisation of benefit claimants and the expansion of stigma to include disabled people. The third and final section focuses on mechanisms of benefits stigma and the role of the media in crafting stigma in the contemporary era, along with forms of resistance, highlighting the ongoing need to explore lived experiences in this context.

3.2 Britain's welfare regime in a global perspective

3.2.1 Characterising and comparing modern capitalist welfare states

Rather than conceiving the development of the British welfare state in isolation, examining it within the context of other developed capitalist welfare regimes allows a more critical and comparative viewpoint. Doing so helps to challenge taken-for-granted ideas about the nature of Britain's welfare state and examines the possibility of alternative regimes, which arguably 'helps to clarify the nature of the British system itself' (Cochrane *et al*., 2001, p.vii). Esping-Andersen's (1990) typology of modern capitalist welfare regimes, derived from a large-scale, comparative study, provides a framework for contextualising the historical trajectory of Britain's welfare provision and the salience of stigma. Esping-Andersen (1990, p.29) argues that while the development of modern welfare states generally occurred in a similar climate of economic growth, industrialisation and the emergence of capitalism, there are vast differences between welfare regimes, which he argues cannot be adequately theorised in terms of linear explanations or single factors, such as 'more or less power, industrialization or spending' (p.3), as advocated in many previous studies. Instead, he conceptualises such variations in a more dynamic, multi-dimensional fashion through his typology of welfare regimes, which focuses on 'the principles embedded in welfare states' (Esping-Andersen, 1990, p.32).

Taking a broad, comparative approach, Esping-Andersen (1990, p.3) draws attention to what he believes are the 'salient characteristics' of welfare states, which form the basis for the different regime-types he identifies. Following from T.H. Marshall's (1950) proposition that welfare states ought to be defined in terms of the fundamental principle of social citizenship and inspired by Polanyi's (1944) conception of social rights, Esping-Andersen (1990, p.21) argues that welfare states must be understood in terms of the degree to which they grant 'social rights…on the basis of citizenship rather than performance'. Indeed, the emergence of industrial capitalism and waged labour created the potential for citizens to become commodified, as their survival and welfare became dependent on the sale of their labour power (Esping Andersen, 1990). In this context, social rights, granted through welfare regimes, can play a role in diminishing this commodity status and emancipating citizens from market-dependence (Esping Andersen, 1990). Hence, advanced capitalist welfare regimes can be differentiated firstly in terms of their capacity for '*de-commodification*', where welfare services are provided 'as a matter of right' (Esping-Andersen, 1990, p.21) in a way that permits citizens

to maintain a decent standard of living, irrespective of their engagement in the labour market and earning capacity, and thus independent of 'pure market forces' (p.3).

Secondly, Esping-Andersen (1990) differentiates welfare regimes in terms of their capacity for *de-stratification*; the extent to which their policies lead to social divisions becoming less pronounced. He acknowledges that although social policy is in theory, supposed to alleviate issues of stratification and promote equality between social groups, it can in fact constitute a 'stratification system in its own right' (Esping-Andersen, 1990, p.4) and serve as 'an active force in the ordering of social relations' (p.23). For example, Esping-Andersen (1990, p.24) contends that 'the poor-relief tradition was conspicuously designed for purposes of stratification' through the punishment and stigmatisation of recipients, with the intention of promoting 'social dualisms', and that contemporary means-tested forms of social assistance which have grown out of that tradition can be read in the same way.

Thirdly, in addition to analysing welfare regimes according to the *social rights* they grant to citizens in reducing commodity status and diminishing social divisions, Esping-Andersen (1990, p.4) differentiates welfare regimes by the degree of involvement of the state, the market and the family in the provision of welfare, and the varying relationships between such entities. Indeed, he observes that 'both social rights and social stratification are shaped by the nexus of state and market in the distribution system' (Ibid., p.4). Esping-Andersen (1990, p.28) argues that characterising and comparing welfare states according to their degree of (de)commodification, (de)stratification and state-market-family relations, is far more illuminating than examining them in terms of being 'more or less' or 'better or worse' than one another. Now that the core differentiating characteristics of welfare regimes have been outlined, the next section illuminates how they play out in Esping-Andersen's (1990) tripartite typology of welfare regimes.

3.2.2 Three contrasting welfare regime types: Liberal, conservative and social democratic

Esping-Andersen (1990, pp.26-28) identifies three highly diverse regime-types or 'worlds' of welfare capitalism - liberal, conservative and social democratic - around which, he argues, most welfare states can be clustered. Rather than being overly rigid or prescriptive categories that different countries fit neatly into, these serve as 'ideal types' for exploring how welfare states differ in character (Ibid., p.58). In the 'liberal' regime type, archetypically exemplified in the United States, Canada and Australia, social assistance is predominantly means-tested, rather

than universal, and social insurance plans typically lack generosity (Esping-Andersen, 1990, p.26). State welfare benefits in this type of regime therefore cater predominantly to low-income, working-class clientele (Ibid.). Within this model, the evolution of social policy has been severely constrained by 'traditional, liberal work-ethic norms' which base the amount of financial assistance given on the underlying assumption of the recipients' 'propensity to opt for welfare instead of work' (Esping-Andersen, 1990, p.26). Hence, criteria for entitlement to welfare benefits within the 'liberal' model tend to be 'strict and often associated with stigma', and welfare benefits are 'typically modest' (Ibid., p.26). Accordingly, by securing only a minimum level of welfare, the state both 'passively' 'encourages the market' (Esping-Andersen, 1990, p.26-27), and 'actively' does so 'by subsidizing private welfare schemes' (p.27). Consequently, this regime type offers minimal scope for de-commodification and in fact further commodifies citizens, as their ability to secure a decent standard of living is dependent on, and differentiated by, access to and engagement in the market (Esping-Andersen, 1990, p.27). Moreover, in terms of its capacity for de-stratification, the liberal model can be seen to *create* a system of social stratification between recipients of state welfare, who live in relatively equal levels of poverty, and the more comfortable majority whose access to welfare is 'market-differentiated', with a 'class-political dualism' existing between the two groups (Esping-Andersen, 1990, p.27). Within this model, 'concerns of gender matter less than the sanctity of the market' (Ibid., p.28), therefore liberal welfare regimes tend not to attempt to mitigate against gender inequalities in their social security policies.

A second regime type that Esping-Andersen (1990, p.27) identifies is the conservative or 'corporatist' model of welfare which broadly clusters European nations such as France, Germany, Austria and Italy together based on the key characteristics of their welfare regimes. In this model, 'the liberal obsession with market efficiency and commodification' has never predominated but instead such welfare regimes have served to uphold traditional 'status differentials' (Esping-Andersen, 1990, p.27) through offering distinct programmes of social insurance to different class and status groups with 'conspicuously unique' 'rights and privileges' (ibid., p.24). Hence, the conservative regime-type does not achieve the goal of de-stratification, but instead creates and reinforces traditional social divisions between groups to maintain existing hierarchies. Rather than being provided through private insurance or occupational fringe benefits, welfare is provided predominantly through state-subsidised social insurance schemes. Moreover, in addition to accentuating occupational and class divisions,

such regimes are typically influenced by the Church and are therefore strongly dedicated to upholding traditional family values and structures and, in turn, traditional gender roles (Esping-Andersen, 1990). For example, social insurance schemes in such regime types do not typically cater for non-working married women; the assumption is that they will be supported by a male breadwinner (Ibid.). Family benefits are also offered to encourage motherhood, and childcare services are 'conspicuously underdeveloped' to reinforce the domestic role of women as stay-at-home mothers, serving to highlight 'that the state will only interfere when the family's capacity to service its members is exhausted' (Esping-Andersen, 1990, p.27). Hence, in this regime-cluster, the family plays a prominent role in securing the welfare of citizens both through women's unpaid domestic labour and through the financial support of the male breadwinner.

The third and smallest regime cluster is the 'social democratic' regime, predominantly exemplified in Scandinavian countries, such as Sweden, Norway and Denmark, where social democracy was the preeminent force driving social reform (Esping-Andersen, 1990). Rather than pursuing 'an equality of minimal needs', as seen in the liberal model, welfare states within this regime-type were designed to 'promote an equality of the highest standards' between the working-classes and the new middle classes, so as to embody 'the principles of universalism' (Esping-Andersen, 1990, p.27), so that 'all citizens are endowed with similar rights, irrespective of class or market position' (p.25). As such, the social democratic regime type offers the greatest degree of de-commodification, as the generous, universal provisions allow many aspects of citizens' lives to be lived outside of any kind of relationship to what they earn, so that they can enjoy quality living standards by right of citizenship, thus emancipating them from market-dependence (Esping-Andersen, 1990). Within this model, the market takes a negligible role in the provision of welfare, and the strong emphasis on the family seen in the conservative regime-type is not so prominent (Ibid.). Instead, the *state* plays a heavily interventionist role in welfare provision, with a commitment to a 'heavy social-service burden' to pre-emptively support the needs of families and enable women to choose paid employment in the labour market rather than remain at home (Esping-Andersen, 1990, p.28). For example, such welfare states take 'direct responsibility' for the care of children, the elderly and vulnerable groups, rather than relying on the family or the market to do so (Ibid., p.28). As a result, this model 'constructs an essentially universal solidarity in favour of the welfare state' as *all* citizens are dependent on it and benefit from it, and thus pay to support it (Esping-

Andersen, 1990, p.28). The universalistic aspect of the social democratic regime-type means that it undermines traditional social divisions and inequalities based on class, gender and ethnicity and thus offers a high degree of de-stratification. Moreover, Esping-Andersen (1990, p.28) argues that 'perhaps the most salient aspect' of this model is 'its fusion of welfare and work', where, unlike the other two regime-types, full employment is advocated as a fundamental characteristic of their welfare state commitment. While social democratic regimes tend to offer very generous income protection in the event of *un*employment, such generous, de-commodifying, publicly-funded welfare states are both committed to, and also 'entirely *dependent*' on, the attainment of full employment in order to adequately fund the system (Esping-Andersen, 1990, p.28, my emphasis). Hence, they focus on minimising social problems through a universal, generous system, which in turn maximises revenue.

In terms of theorising the *causes* of these major divergences in the character of modern capitalist welfare regimes, Esping-Andersen (1990, p.29) contends that the explanation is far from simple; there is no 'one single powerful causal force'. Nonetheless, he argues that class was an important factor (Ibid.). Indeed, while modern welfare states emerged under similar conditions in the context of economic growth and the birth of industrial capitalism, differences can be noted in patterns of 'class mobilization', particularly that of the working-class, and 'class-political coalition structures', for example, trade unions and political parties (Esping-Andersen, 1990, p.29). Nonetheless, each of the clusters identified feature strong labour movements and parties, so it is misleading to assume that 'workers will automatically and naturally forge a socialist class identity' that strives for a social democratic system (Esping-Andersen, 1990, p.29). Furthermore, the middle-classes and their 'political leanings' have been influential in the formation of different welfare states; the Scandinavian social democratic model was created to *incorporate* the middle classes into the welfare state, while the liberal 'Anglo-Saxon nations retained the residual welfare state model' because the welfare needs of the new middle classes could be satisfied outside of the state, and instead by the market, through private insurance and occupational fringe benefits (Esping-Andersen, 1990, p.31). The conservative welfare regime type favoured in continental Europe has also been sustained by the new middle-classes, as the regime type was formed by 'conservative political forces' (ibid., p.31) with the intention of embedding and cementing 'a middle-class loyalty' to the preservation of a particular kind of welfare state which reinforces status divisions and preserves existing hierarchies.

In addition to explaining the historical evolution of welfare states, Esping-Andersen's (1990) framework helps to conceptualise their future prospects in terms of retrenchment or decline. While popular wisdom may espouse the idea that 'backlash movements, tax revolts, and roll-backs' to the welfare state are most prevalent when welfare spending is highest, Esping-Andersen (1990, p.33) points out that 'paradoxically, the opposite is true'. Indeed, rather than expenditure being the decisive factor in determining support for the welfare state, the risks of backlash against the welfare state are dependent on 'the class character of welfare states' (Esping-Andersen, 1990, p.33). Accordingly, welfare states which support the needs of the middle classes, as in the social democratic and conservative regimes, 'forge middle-class loyalties' (Esping-Andersen, 1990, p.33), whereas the 'liberal, residualist welfare states found in the United States, Canada and, increasingly, Britain' predominantly cater to the poor and thus 'depend on the loyalties of a numerically weak, and often politically residual, social stratum' (p.33), therefore anti-welfare-state sentiments are stronger in such nations. Accordingly, the stigma associated with receiving state welfare in these nations is also greater.

3.2.3 Situating Britain's welfare regime

As mentioned earlier, Esping-Andersen (1990) stresses that while different welfare states *broadly* cluster into the different regime-types he identifies, they are not pure or exclusive categories where one country fits neatly into one type. Britain is particularly difficult to fit within one regime-type, owing to its complex historical trajectory where the centrality of the state in the provision of welfare, relative to that of the market and the family, has fluctuated over time, and there has been an ongoing tension over whether benefits ought to be insurance-based or means-tested (Coats *et al.*, 2012). Britain can therefore be seen as 'a curious hybrid, sitting somewhere between the liberal and social democratic regimes' (Ibid., p.46). Despite some divergences one can observe a general trend towards the liberal regime-type identified by Esping-Andersen (1990) in which stigma is more apparent, with notable continuities evident between pre-1945 government responses to poverty, and the trends in welfare provision since the neoliberal shift of the 1970s, especially since the 2008 economic crisis. This chapter now outlines Britain's welfare policy trajectory from early forms of financial assistance for the poor through to the present day, highlighting key ideological and associated policy shifts, and continuity and change in the role of stigma.

3.3 Stigma and social welfare in Britain: a historical trajectory

3.3.1 Stigma in early state assistance

Prior to the creation of a centralised, large-scale, comprehensive system of welfare provision in Britain following the Second World War, relief provided for the poor by the state was localised, permissive and piecemeal, and Christian charity played a significant role (Barr, 2004, p.16). Notably, the 1601 Poor Law Act made each parish responsible for its poor, distinguishing between the 'impotent poor' who were housed in 'almshouses' and supported via weekly collections, and the 'able-bodied poor' who were given work in a 'house of correction', with punishments for those who refused to work (Barr, 2004, p.17). The key intention, according to Barr (2004, p.18), was not to be punitive but to 'give work to the able-bodied without stigma', however it demonstrates an early manifestation of the stigmatising distinction between those deemed deserving of unconditional support and those considered undeserving, warranting punitive conditions. This locally financed, pre-industrial system remained in place for almost two centuries, but came under pressure owing to population growth, increasing social and geographical mobility, industrialisation and economic instability (Barr, 2004). By 1795, due to food shortages and inflation, the Speenhamland system was introduced to extend aid in the form of outdoor relief to people in work, supplementing their wages with an 'allowance' based on bread prices (Barr, 2004, p.17). Nonetheless, this system of poor relief came under attack from various economists and social reformers because of the rising costs of such provision in the aftermath of the Napoleonic wars (Ibid.).

The policy interventions which followed were therefore explicitly intended to reduce the cost of governing the poor, and stigma was a core mechanism through which this cost reduction was to be achieved (Pinker, 1971; Page, 1984; Walker, 2014). The Poor Law Report and subsequent Poor Law Amendment Act of 1834, underpinned by a laissez-faire philosophy, based its recommendations for reform on the 'principle of less eligibility' (Page, 1984, p.25). This was the belief that poor relief for able-bodied recipients should be kept to a minimal level to ensure that the living conditions of recipients were 'less favourable than those of the poorest independent labourers' (Page, 1984, p.25). It was argued that without this principle, able-bodied paupers would be encouraged to remain dependent on poor relief, rather than seeking paid employment (Barr, 2004; Walker, 2014). The Act therefore stipulated particular conditions that recipients would have to meet to be considered eligible for poor relief; they and other dependent family members had to reside within the institution of the workhouse, 'wear

distinctive clothing' and 'undertake monotonous and degrading' work, with further punishments given for not reaching daily quotas (Page, 1984, p.25-26). Moreover, husbands, wives and children were strictly segregated within the workhouse setting (Barr, 2004). Owing to the degrading conditions, Pinker (1971, p.58) contends that the principle of less eligibility and indoor relief can be understood as 'a psychological device, intentionally imposing the pain of humiliation and stigma' in order to deter potential claimants and save the government money. Consequently, according to Esping-Andersen (1990, p.36), the Poor Law Amendment Act was 'an active social policy' designed to ensure waged employment and monetary exchange 'the linchpin of a person's very existence', commodifying the worker and encouraging dependence on the market, rather than the state. Hence, in many ways, this residual welfare provision fits with the liberal regime-type identified by Esping-Andersen (1990) where welfare provision is low, designed to cater to only the poorest in society, and is thus strongly associated with stigma, which was deliberately embedded into the system as a deterrent. Such a system commodified people more and, rather than alleviating social stratification, it accentuated class divisions through its punitive approach to poverty.

The reforms implemented by the Liberal government 1906-14, which laid the foundations for the post-1945 welfare state, appeared to mark a break, at least partially, with the laissez-faire approach of before, as they demonstrated a shift towards centralised state intervention in key policy areas such as childhood, pensions, health, unemployment and fiscal policy (Harris, 2004; Barr, 2004). Such reforms are argued by Hay (1975) to have been the result of three key factors: working-class political pressure, changing attitudes to welfare provision in terms of the recognition of the need for a healthy workforce to best foster economic growth, and institutional influences on reforms, such as that of the Friendly Societies and civil service. Moreover, attitudes to poverty during this era were also influenced somewhat by the research of Rowntree (1901) and Booth (1902), which indicated that poverty was much more prolific than previously assumed, and that poverty, even among able-bodied paupers, was not the result of moral inadequacy, but had structural causes and solutions. During the early twentieth century, governments of all parties demonstrated an awareness of the stigmatising potential of poor relief policies and thus attempted to devise 'unemployment income maintenance schemes' with the aim of providing 'unemployment relief on more socially acceptable terms' (Page, 1984, p.28). Legislation in this period included the 1905 Unemployed Workmen's Act, the 1920 Unemployment Insurance Act and the abolition of the Poor Law in 1929 (Harris, 2004).

Governments were also given some limited powers over minimum wages (Barr, 2004) suggesting a partial shift towards state intervention in the market. These simultaneous developments in key areas of social policy mark an ideological shift from before (Marsh, 1980), but such reforms were relatively 'minor and had limited coverage' (Barr, 2004, p.23). For instance, rather than being universal, unemployment insurance was only provided to those working in certain industries and earning less than £160 per year (Barr, 2004, p.22). Similarly, while old-age pension was introduced on a non-contributory basis, it was means-tested and only applied to the poorest elderly people (Coats *et al.*, 2012). Moreover, attempts to reduce the stigma associated with poor relief were not always successful, for instance, the Poor Law Reports of 1909 retained the distinction between the 'deserving' and 'undeserving' poor in the allocation of poor relief, recommending that the former receive aid from the Voluntary Aid Committees, and the latter from Public Assistance Committees (Page, 1984, p.27). Furthermore, there remained some acceptance that 'stigmatizing measures were necessary, for the purpose of deterrence, in cases of idleness and malingering' (Page, 1984, p.27), therefore benefits remained low to prevent deliberate unemployment (Barr, 2004). Hence, the success in creating a less stigmatising system was hindered by a 'continuous concern about cost and abuse', and the resultant retention of 'less eligible procedures such as seeking work or means tests' (Page, 1984, p.28). The period following the Liberal reforms - the First World War and inter-war years - was largely one of stagnation in terms of social reform except in housing due to acute shortages following the war and in unemployment insurance owing to inordinately high levels of unemployment (Barr, 2004). The family also played a key role in securing individuals' welfare during this period, as well as philanthropic organisations (Harris, 2004).

3.3.2 The post-war welfare state

Though it built on the foundations already laid in the history of British welfare provision and responses to poverty (Barr, 2004), the emergence of the welfare state following the Second World War can be considered in some respects as marking a distinct shift away from the residual, laissez-faire model of welfare provision seen previously (Harris, 2004). During this period, despite divergences in some aspects of social policy, there was 'an unprecedented degree of inter-party agreement on the broad principles of welfare provision', (Harris, 2004, p.1), known as the post-war consensus, which broadly lasted from 1945 until the 1970s (Fraser, 2009; Coats *et al.*, 2012). Reforms in the key areas of healthcare, education, employment, housing and poverty relief were deemed necessary by politicians across the political spectrum

owing to the inability of the existing arrangements to adequately ameliorate the social and economic climate of the previous decade (Coats *et al.*, 2012). Consequently, during the Second World War, a series of reports advocating changes to welfare provision, most notably Beveridge's (1942) *Social Insurance and Allied Services* report, helped to trigger a 'widespread desire for social reconstruction in the post war period' (Harris, 2004, p.1). Beveridge's (1942) report was influenced by the findings of earlier research, such as the Webbs' (1909) *Minority Report of the Royal Commission on the Poor Laws*, and Rowntree's (1941) research in York, which drew attention to the structural origins of poverty and, accordingly, the need for state intervention. The Beveridge report (1942) therefore set out a template programme of measures for tackling 'the five giants' of disease, ignorance, idleness, squalor and want, to be financed by general revenues, and provided to by virtue of citizenship.

Reforms during this period therefore signified a radical shift away from the liberal model and the punitive, stigmatising forms of welfare associated with the Poor Law, and towards the social democratic regime-type identified by Esping-Andersen (1990). Indeed, responsibility for people's collective welfare needs was placed firmly in the hands of the state, rather than on individuals or families (George and Wilding, 1975; Heclo, 1980; Fraser, 2009). Furthermore, the 'welfare state acquired an ideological life of its own' in which it 'became infused with a series of vague but deeply and widely held beliefs: as part of a common society, we *do* have shared needs; people - all people - are entitled to a decent life; privilege and greed *must not* be allowed to emasculate citizens' social rights' (Heclo, 1980, p.39, emphasis in original). This focus on de-commodified social citizenship rights was evident in key landmark social security policies such as the 1945 Family Allowances Act, a universal, non-means-tested benefit, and the 1946 National Insurance and Industrial Injuries Acts and the 1948 National Assistance Act (Fraser, 2009; Coats *et al.*, 2012). Other important policies underpinned by the ideology of universalism included the creation of the National Health Service in 1948, and the 1946 New Towns Act to tackle housing shortages (Fraser, 2009; Coats *et al.*, 2012). Another notable shift was the state's intervention in the economy and taxation system, influenced by Keynesian economics (Pierson and Leimgruber, 2010). As a result of such policy interventions, wealth and social goods were redistributed, and income inequalities were reduced in the period between 1945 and the late 1970s (Levitas, 2005), thus indicating de-stratification (Esping-Andersen, 1990). During this era, attempts were made to reduce the stigma of 'non-contributory unemployment assistance', such as the abolition of the household means test in

1941, replacing it with a personal means test where considered appropriate, and the creation of the National Assistance Board in 1948, replacing the Poor Law Board (Page, 1984, p.28). Moreover, the notion of universalism was infused into policies related to housing, education and healthcare, and into non-contributory, universal benefits such as the Family Allowances Act, offering some degree of de-commodification.

Nonetheless, the post-war aim of universalism in policy areas such as housing, education and healthcare was generally not extended to social welfare benefits in the same way (Titmuss, 1958). Hence, Coats *et al*. (2012, p.40) argue that the system was infused with 'stubborn contradictions'. For instance, attempts to reduce the stigma of unemployment benefits were undermined by the retention of the distinction between 'contributory and non-contributory forms of income support' through means-testing, which were regarded by many post-war academics as inherently divisive and stigmatising (Page, 1984, p.28). Hence, rather than promoting de-stratification through universal policies, the post-war welfare state can be said to have retained and reinforced existing class-based divisions. Moreover, post-war welfare policy can be seen to contain particularly gendered aspects and assumptions (Wilson, 1977; Sainsbury, 1994; Briar, 1997). For instance, the commitment to full employment seen in Beveridge's (1942) report 'was assumed to depend on a sole male breadwinner in each household' (Coats *et al.*, 2012, p.37), and the 'family wage' embedded a 'clear view of a gendered division of labour' between males and females (Clarke *et al.*, 2001, p.37), thus institutionally reinforcing gender-based social divisions. These gendered assumptions are explored more fully in the next chapter which critiques the British welfare state through a feminist lens. Despite such limitations, the post-war welfare state still represented a radical break between the meagre and overtly stigmatising forms of assistance in place before its creation, and the fierce revival of stigma which would follow.

3.4 The Neoliberal turn

3.4.1 Neoliberalism and Thatcher's anti-welfare stance

The late 1970s marked a stark break with the post-war consensus and the beginning of a period of considerable change to the British welfare state, and modern capitalist welfare states more generally (Esping-Andersen, 2000). During this period, Britain's welfare provision diverted away from any affinities with the Nordic countries and gradually shifted further towards a more residual model with greater emphasis on means testing, and greater responsibility for welfare provision transferred to the market, thus making it closer to the North American regime type

(Esping-Andersen, 2000). This exemplified a 'radical regime shift' (Esping-Andersen, 1996, p.15). Attacks on the existing welfare state consensus by critics across the political spectrum began to gain more momentum during the 1970s, owing to a climate of severe economic unrest following two oil price shocks, the 1976 fiscal crisis and the Labour government's application for a loan from the International Monetary Fund (Coats *et al.,* 2012). In this context, the existing system of welfare provision was framed as costly and inefficient, and following her election in 1979, Thatcher and her Conservative government established a new trajectory in welfare provision, heavily influenced by the free market economic philosophies of Hayek and Friedman and the ideology of the New Right (Coats *et al*., 2012).

The New Right ideology was an amalgamation of neoconservative ideals emphasising community, hard work and traditional family values, with the doctrine of neoliberalism (Levitas, 2005). Neoliberalism refers to the resurgence of the 19th century 'liberal' philosophy advocating limited state intervention in economic and social affairs, favouring the deregulation and increasing domination of the market over all areas of social life, increasing privatisation of public enterprises and the rolling back of welfare support, with the intention of redistributing wealth upwards (Harvey, 2005; Levitas, 2005; Wacquant, 2009). Since the adoption of neoliberal principles from the late 1970s and the rejection of the social democratic ideals shaping the post-war welfare state, income inequalities in the UK (and other advanced capitalist nations) have widened significantly, with escalating poverty alongside an increasing share of wealth being channelled upwards to the top income groups (Levitas, 2005; Wacquant, 2009; Lansley and Mack, 2009; Piketty, 2014). Hence, rather than de-stratifying social groups (Esping-Andersen, 1990), neoliberal social policies can be seen to have promoted further stratification and inequality.

Influenced by such ideals, Thatcher posited a negative view of state welfare provision in terms of its capacity to promote a 'culture of dependency' and idleness (Levitas, 2005, p.15). The Thatcher government was therefore much more overtly hostile to the principles of welfare provision than any of its post-war predecessors' (Harris, 2004, p.1). In the socio-economic climate of soaring levels of unemployment and poverty in the early 1980s putting pressure on social security spending, Thatcher's Conservative government responded by restricting the eligibility criteria for welfare benefits, denying or obscuring the reality of 'the existence of poverty' and utilising victim-blaming strategies to 'blame the poor for their own situation' (Levitas, 2005, p.14). Influenced by the ideas of US right wing political commentator Charles

Murray (1990), 'references to the "underclass" and to a "culture of dependency" became embedded in a discourse concerned with social order and moral integration' (Levitas, 2005, p.14). This was a deeply gendered discourse, which blamed mothers in socialising their illegitimate children into moral degeneracy (Brown, 1990; Bagguley and Mann, 1992; Mann and Roseneil, 1994). This dominant narrative around welfare became hugely popular both in the political and public domain demonstrating a shifting emphasis 'from the structural basis of poverty to the moral and cultural character of the poor themselves' (Levitas, 2005, p.15).

Legitimated by the popular moral discourse around the supposed ills of overgenerous state welfare provision, the Conservative government reduced unemployment benefits to ensure that the gap between benefits and wages was widened (Johnson, 1990), reflecting the 19th Century stigma-laden principle of less eligibility. Moreover, the level of means-testing for benefits was increased and 'increasingly onerous conditions' were placed on claimants (Johnson, 1990, p.29). The 'Availability for Work' Test of 1986 stipulated that all claimants were required to take *any* full-time job immediately, work beyond normal travelling distance and make immediate arrangements for family care (thus affecting women more than men) (Glendinning and Millar, 1987; Johnson, 1990). This was reinforced by the Social Security Act 1989, which bolstered the requirements of the availability for work test with the requirement that claimants must demonstrate they have been 'actively seeking work', or else face cuts to benefits (Johnson, 1990, p.29). Jobseeker's Allowance (JSA) was introduced in 1996 intensifying the obligations placed on benefits claimants to evidence compliance and introducing harsher sanctions (Fletcher, 2015). Welfare policy was even more punitive for the longer-term unemployed, for instance, those claiming benefits for over three months were compelled to take up employment 'outside their usual occupation or place of residence' and could no longer refuse a job due to low wages (Johnson, 1990, p.29), thus restricting the level of freedom and choice available to welfare recipients and increasing their dependence on the market.

Moreover, these harsher conditions attached to unemployment benefits can be seen to have had worse consequences for women than men because being 'available to work' implied that their availability should be immediate, yet women with children would also have to demonstrate they had made suitable childcare arrangements (Johnson, 1990, p.212). Furthermore, the 'actively seeking work' condition can also be seen to have worked against women who were predominantly responsible for childcare and domestic responsibilities (ibid.). Hence, such policies can be seen to exacerbate gender divisions. The policy developments since 1979

demonstrated a further shift towards the liberal model of welfare identified by Esping-Andersen (1990), as they promoted further commodification of citizens owing to an increasing reliance on the market to secure a decent living standard, and also promoted further social stratification between the working and middle classes as well as between males and females. (the gender dynamics of the welfare state are attended to in detail in the next chapter).

3.4.2 New Labour: Rights and responsibilities

The neoliberal ideology which had reshaped British welfare provision during the 18 years of Conservative rule under Thatcher and Major was largely retained by Labour Prime Minister Blair after he was elected into power in 1997. Indeed, Blair's Labour government 'seemed determined to rid itself of its historical reputation as the party of 'tax and spend'' (Harris, 2004, p.1) and, consequently, continued to implement some of the key policy assumptions around welfare established under the preceding governments. Blair (2002, unpaginated) argued the need to depart from 'the narrow, selfish individualism of the 1980s, but also the 1945 "big state" that wrongly believed it could solve every social problem', and instead build an '*enabling* state founded on the liberation of individual potential'. This 'Third Way' political vision was largely based on the notion of no 'rights without responsibilities' (Giddens, 1998, p.65), hence welfare policy became further underpinned by the stigmatising 'principle of conditionality' (Dwyer, 2004, p.265). The increasing centrality of conditional entitlements systematically undermined the idea of 'welfare rights' and 'collective social welfare provision', making citizenship dependent on individuals fulfilling particular state-endorsed, market-oriented sanctions and regulations (Dwyer, 2004, p.266-267), thus commodifying citizenship rights (Esping-Andersen, 1990). Hence, this policy shift can be conceived as a significant divergence from the 'post war idea of the welfare state based on the principle of universal entitlement derived from citizenship' (Cox, 1998, p.3) and a further shift away from Esping-Andersen's (1990) social democratic regime-type and towards the 'liberal' one. This signified a further divergence from the 'welfare society' of post-war Britain, towards an 'active society' which focuses on activating the individual with a key emphasis on the importance of engagement in paid employment (Walters, 1997; Wetherley, 2001). This can be seen in the New Deal programme for unemployed people, single parents, and sick and disabled people, aiming to 'provide new opportunities' in exchange for people fulfilling particular responsibilities (Blair, 2002, unpaginated). This rhetoric of reciprocity and individual responsibility, underpinned by assumptions of stigma, continued under Labour leader Gordon Brown (2007-10).

3.5 The austerity era

3.5.1 Austerity and political narratives

The global financial crisis of 2007/8 provided the ideal conditions in which neoliberal principles could continue to dominate, and in which the further retrenchment of the British welfare state could be implemented and justified (Cooper and Whyte, 2017a, 2017b; Tyler, 2020). Though the true causes of the global financial crisis stemmed from the neoliberal deregulation of global financial systems (Cooper and Whyte, 2017b), the supposedly overgenerous welfare expenditure of the previous government provided a convenient scapegoat, with Cameron (2008, unpaginated) explicitly blaming a 'budget deficit' under Gordon Brown's leadership. The proposed solution to the national debt in the wake of the financial crisis was an austerity programme of 'fiscal discipline' and significant cutbacks to public expenditure (Cooper and Whyte, 2017b, p.4), justified by the notion that 'we're all in this together' (Ibid., p.10; Osborne, 2012). Jarringly however, rather than having an equal effect across society, the unprecedented austerity-driven cuts to incomes, social security benefits and public services, alongside rising living costs, were designed to disproportionately target those who are already vulnerable and marginalised in terms of gender, class, ethnicity and disability (Beatty and Fothergill, 2016; Cooper and Whyte, 2017a, 2017b; Tyler, 2020). Meanwhile, the wealth and income of the elite has continued to increase exponentially (Cooper and Whyte, 2017b), furthering the neoliberal aim of redistributing wealth and power upwards (Harvey, 2005; Tyler, 2020).

Austerity is not merely an economic programme of reform, but an *ideological* project relying on stigma to generate public consent for the unprecedented wave of cuts and reforms, making them appear fair and necessary (Jensen and Tyler, 2015; Shildrick, 2018; Tyler, 2020). Political rhetoric plays a central role in the crafting of stigma. Based on an analysis of House of Commons speeches on welfare from the late 1980s to 2015, O'Grady (2017, para. 1) argues that the trend of declining public support for welfare during this period (Clery *et al.*, 2013; Baumberg, 2014; Clery, 2015; Taylor-Gooby, 2015) is a 'top-down phenomenon', influenced by the language used by politicians. The divisive, common-sense anti-welfare narratives espoused by politicians have served to deliberately manufacture public ignorance around welfare spending and the lives of those receiving benefits, paving the way for the most radical changes to the British welfare state since its inception (Jensen and Tyler, 2015; Patrick, 2017a; Shildrick, 2018; Tyler, 2020).

The policy rhetoric of David Cameron's Conservative and Liberal Democrat Coalition government of 2010-2015 around the topic of welfare reflected earlier themes of denouncing a 'benefits culture' that not only allows but 'actively encourages' irresponsible behaviour and traps recipients 'in a fog of dependency' (Cameron, 2011a). This provided the justification for increasing conditionality and punitiveness in the welfare system. Post-2010 welfare reforms were largely shaped by David Cameron and the then Chancellor of the Exchequer, George Osborne, and the then Secretary of State for the Department of Work and Pensions, Iain Duncan-Smith, who have 'repeatedly articulated an austerity-driven, anti-welfare rhetoric to justify the many changes introduced' (Patrick, 2017a, p.4). While this rhetoric could be seen as reflecting 'longstanding demarcations between deserving and undeserving populations', it could also be seen as having particularly 'distinctive elements' in terms of the stigmatising language used to discuss welfare recipients (Patrick, 2017a, p.4). For example, former Chancellor of the Exchequer George Osborne, suggested that unemployed people are 'sleeping off a life on benefits' (Osborne, 2012, unpaginated), and binary distinctions were maintained between a 'deserving' group 'who want to work hard and get on' (Osborne, 2012, unpaginated), and an undeserving, idle category of people, allegedly 'languishing on welfare' (Duncan Smith, 2014, unpaginated).

Despite continuities in the political and media narratives surrounding poverty and welfare over time, during the austerity era there has arguably been a recent shift towards more divisive portrayals of the poor, juxtaposed with 'hardworking people' (Patrick, 2017a). In discussing 'the storytelling that makes up popular political discourse', Meek (2016, para. 2) argues that, in the neoliberal capitalist nations of Europe, Australia and North America, the 'Robin Hood' 'political-economic fable' of the need to 'take from the rich to give to the poor' and redistribute wealth in society has been turned on its head by the rich and powerful, 'for their advantage'. Indeed, Meek (2016, para. 10) argues that 'the social category previously labelled "poor"', for instance unemployed or disabled benefits claimants, are 'accused of living in big houses, wallowing in luxury and not needing to work', while those previously considered wealthy are conceptually 'redesignated as the ones who work terribly hard…forced to support this new category of poor-who-are-considered rich'. This reconceptualisation of the 'poor' is espoused by politicians and seen in popular media portrayals. In political discourse, Meek (2016, para. 13) argues that a 'key signifier' of this shift is 'the phrase "hardworking people", frequently used by right wing politicians, which subsumes 'the entire spectrum of employed people with

property', including the very wealthiest in society, into one conceptual category portrayed as hard done by in comparison to the supposedly greedy, workshy, undeserving benefit claimant, for instance. Such language justifies increasingly punitive and conditional policy interventions, which are discussed next.

3.5.2 Austerity-driven welfare reforms

Legitimated by the amplified stigmatisation of those who claim benefits, coupled with the post-crash ethos that 'we are all in this together' (Osborne. 2013), austerity policies since 2010 are estimated to have cut social security benefits by £35 billion a year (Ryan, 2019, p.194). The Coalition government's focus on implementing a 'fairer' benefits policy which supposedly ensures that 'work pays' **(**Gordon, 2011, p.15) echoed the principle of less eligibility seen in 19th century welfare policy in guaranteeing that benefits are kept at a minimal level to deter people from *choosing* welfare over paid work. Moreover, welfare policies since the advent of the austerity agenda have been increasingly focused around or designed to mimic paid work. The 2011 Mandatory Work Activity scheme, for instance, required Jobseeker's Allowance claimants to undertake a month's full-time work in order to continue receiving their benefits and to avoid receiving a benefit sanction of up to six months (Fletcher, 2015). Such 'punitive programmes…attempt to recast "supply side" problems as the product of deficient work ethic' (Fletcher, 2015, p.2), and reinforce the low-paid, insecure types of work that have flourished in the post-industrial, post-Fordist, neoliberal era since the late 1970s (Piven, 2010; Shildrick *et al.*, 2012; Dean, 2012; Grover, 2019).

A central policy in the austerity-led restructuring of the welfare state was 2012 Welfare Reform Act (Legislation.gov.uk, 2012). This core policy prompted the rollout of Universal Credit from 2013, introduced new conditions around looking for work, including a 'claimant commitment', increased the remit and severity of benefit sanctions for perceived non-compliance with such conditions, introduced a Household Benefit Cap, and introduced the 'spare room subsidy' or "bedroom tax" to Housing Benefit recipients (Legislation.gov.uk, 2012). Furthermore, the Act brought about unprecedented changes to assessment and entitlement to disability-related benefits (Stewart, 2016; Ryan, 2019), and to Lone Parent Obligations (Dwyer and Wright, 2014; Haux and Whitworth, 2014; National Audit Office, 2016; Hudson-Sharp *et al.*, 2018). The rollout of Universal Credit has presented a significant change, estimated to affect around eight million households once fully rolled out, as it serves to consolidate six types of means-tested benefits and tax credits into a single benefit, based on income, assets and circumstances,

and is paid monthly (Millar and Bennett, 2017, p.2). While commentators have supported the some of the principles behind the introduction of Universal Credit in terms of its alleged simplicity (Summers and Young, 2020), concerns have been raised about its delivery and about the policy decisions involved in its design, for instance, its aim to be 'as much "like work" as possible' (Millar and Bennett, 2017, p.1).

Through these reforms, welfare conditionality has been expanded to include groups previously exempt, such as sick and disabled people and lone parents (National Audit Office, 2016) as well as social security claimants in low paid work who, under Universal Credit, may be subject to in-work conditionality (Abbas and Jones, 2018). During the austerity era, the 'scope and severity of sanctions' issued by Jobcentre staff for perceived noncompliance with welfare conditions has increased dramatically (National Audit Office, 2016, p.7). Indeed, policy reform meant claimants could be sanctioned for up to three years (Fletcher, 2015), giving reason for Slater (2012, p.2) to argue that such reforms constitute 'the most punitive welfare sanctions ever proposed by a British government'. Further changes were brought about under David Cameron's Conservative government (2015-16), most notably by the 2016 Welfare Reform and Work Act (Legislation.gov.uk, 2016). Changes introduced through his legislation included a further reduction of the Benefits Cap, affecting far more households than previously, the introduction of a 'two-child limit' for tax credits and Universal Credit, and the increase of welfare conditionality for 'responsible carers of children under the age of five' (Lister, 2017, p.xiii-xiv).

While during her period in office (2016-2019) Conservative Prime Minister Theresa May (2018, unpaginated) declared that 'austerity is over', the words lacked sincerity as such reforms and cuts continue to be rolled out. Under current leader Boris Johnson (2019-present), the Conservative government has made promises to 'build back better' and 'level-up' the country following a decade of austerity and a global pandemic (Lee, 2021, unpaginated), signifying a possible changing direction, but whether this will bring about any significant shift away from austerity policies and the punitive welfare system they have helped to craft remains to be seen.

3.5.3 Austerity and disabled claimants

Under austerity, there have been unprecedented changes made to disabled people's benefit entitlements and obligations whereby the boundaries of deservingness have been redrawn, casting many disabled claimants as undeserving of support (Patrick, 2017a; Ryan, 2019).

Disabled people have therefore been pulled into the powerful mechanisms of institutional stigma which characterise the benefits system more generally. Legitimated by stigma and sensationalist media portrayals of benefit fraudsters cheating the system, disabled people - including those with chronic health issues - have become subject to increasing conditionality with more stringent demands to prove their eligibility through new assessments and reassessments for existing claimants (Briant *et al.*, 2011; Ryan, 2019).

The most notable shifts have been the introduction of Employment and Support Allowance (ESA), and the rollout of Personal Independence Payment (PIP) to replace Disability Living Allowance (DLA). ESA was introduced in 2008 for new disability benefit claims, and since 2011, those claiming existing disability benefits (namely Incapacity Benefit (IB)) have been switched on to ESA (Turn2us, 2021a). To qualify, applicants must undergo a Work Capability Assessment (WCA) to determine their eligibility, following which they can be placed into a Work-Related Activity Group (WRAG) (where they can only claim ESA for up to a year) or a Support Group (SG) where they are exempt from work-related activity, but still must reapply and be reassessed when requested to do so (Gov.uk, 2022). Further changes to ESA were announced in 2017, with new claimants applying for a new-style ESA, which is not means-tested but contributions-based, with plans to eventually phase out income-related ESA and replace it with Universal Credit (Gov.uk, 2020; Turn2us, 2021a).

The second core disability policy shift under austerity was the transition of Disability Living Allowance (DLA), a flagship benefit given to help with the costs of daily living associated with having a disability, to Personal Independence Payment (PIP) for people aged 16 or over (Turn2us, 2021b). The rollout of PIP from 2013 saw the introduction of a points-based medical assessment for mobility and daily living domains, and the mandatory reassessment for those already claiming DLA (Ryan, 2019). This benefit was explicitly intended to save the government money by changing the boundaries of eligibility and making the benefit more difficult to claim than DLA (Daguerre and Etherington, 2014; Pring, 2017; Stewart, 2018b; Ryan, 2019). Hence, between 2013, when the new benefit was first rolled out, and 2021 almost half (47%) of disabled claimants formerly claiming DLA have had their entitlement either downgraded or withdrawn entirely following their reassessment for Personal Independence Payment (PIP) (Gov.uk, 2021a). With this benefit, those awarded an enhanced rate for mobility may be entitled to lease a vehicle via the Motability scheme, however, since the transition to PIP, eligibility has been dramatically reduced, with around half of existing claimants having

their eligibility denied, and 75,000 people losing their right to claim from or join the scheme between 2013 and 2018 (BBC News, 2017; Pring, 2018; Motability, 2018).

The outsourcing of the responsibility for overseeing disability assessments to private companies since 2010 is argued to be an effective mechanism to distance the government from the harm that would ensue, demonstrating an awareness and intentionality of such harm (Elward, 2016; Stewart, 2018a). The shift was a key element of the government's austerity agenda intended to save £12 billion in welfare spending (Portes, 2015; Hobson, 2020). Such reforms have had the effect of cutting disabled people's income by an estimated £28 billion (Ryan, 2019, p.61). However, while such reforms were passed with the ostensible aim of cutting government spending on disability benefits, Stewart (2016, 2018b) contends that they are part of a longer-term plan to demolish the UK welfare state and eventually replace it with an entirely privatised system, mimicking the healthcare insurance system in the USA.

3.4 Contemporary mechanisms of stigma and resistance

3.4.1 Stigma and media representations in the austerity era

Working alongside disparaging policy narratives, the media plays an active role in reinforcing and reconstructing dominant stigmatising public and political attitudes around poverty and welfare, by continuing the historical representation of the urban poor as a 'problem' category (Hancock and Mooney, 2012b, p.107, p.111). During the last decade in particular, the UK has witnessed an amplification of benefits stigma in the form of negative media portrayals, divisive political rhetoric and hardening public attitudes towards welfare expenditure and claimants themselves (Jensen and Tyler, 2015; Taylor-Gooby, 2015; Tyler, 2020). This includes disabled claimants, who have been increasingly subject to disparaging media representations (Briant *et al*., 2011; Ryan, 2019). Research by Baumberg *et al.* (2012) involving an analysis of media coverage of benefits in national newspapers from 1995 to 2011, found that the majority of content is biased towards negative portrayals. While the negative media coverage in 2010/11 was at around the same level as in the late 1990s, they identified a notable shift in terms of the *language and content* used. Indeed, although there is some continuity in terms of the persistent reference to fraud, negative portrayals in the austerity era were 'much more likely now to refer to lack of reciprocity and effort on the part of claimants than they were previously' (Baumberg *et al.*, 2012, p.3). This reflects the shift towards the liberal model of welfare identified by Esping-Andersen (1990) where citizenship rights are dependent on individuals' engagement

with the market, rather than framed as universal rights of social citizenship. Media narratives around welfare have been shown to influence public opinion on the topic (Baumberg *et al.*, 2012; Jensen and Tyler, 2015; Tyler, 2020). Evidence from the British Social Attitudes survey, for instance, has suggested a trend since the late 1980s of hardening public attitudes towards benefits claimants, with increasingly fewer people believing that that the government should spend more on unemployment welfare benefits, particularly for those of working age (Clery *et al.*, 2013; Baumberg, 2014; Clery, 2015; Taylor-Gooby, 2015).

Notably, during this period, a hugely popular genre of documentary-style television programmes has emerged, termed 'poverty porn' by some due to it focusing on people living in poverty and claiming benefits as a form of voyeuristic entertainment (Jensen, 2014). In conjunction with sensationalist tabloid stories, such programmes construct and reinforce classed and gendered stigma (Allen *et al.*, 2014) and thus function to 'embed new forms of commonsense about welfare and worklessness' (Jensen, 2014, p.277), making punitive welfare reforms appear fair and necessary. The increasingly pervasive and hugely popular genre of *poverty porn* television continues to embed benefits stigma into public discourse, in order to 'order and mobilise support for punitive anti-welfarism' (Hancock and Mooney, 2012b, p.109) in the context of increasing austerity. Indeed, rather than presenting a realistic picture of life for those receiving benefits, as is claimed by the programme producers, programmes such as *Benefits Street*, *The Fairy Jobmother*, *Benefits Britain* and *The Big Benefits Handout* can be said to consistently and deliberately reinforce stigmatising ideas about benefits claimants (Hancock and Mooney, 2012b; Jensen, 2014; Tyler, 2014b). For instance, such programmes 'repeat imagined connections between welfare recipients and moral laxity, greed and even criminality' (Jensen, 2014, p.277) and thus 'reinforce notions of the benefit claimant as an 'other', who the 'hard-working majority' are invited – even encouraged – to observe and judge' (Patrick, 2017a, pp. 5-6), which may have negative consequences on the lived experiences and self-perceptions of those claiming welfare benefits (Patrick, 2017a, 2017b).

Nonetheless, in the face of relentless stigmatisation, it is important to acknowledge forms of resistance (Tyler, 2020). There have, for example, been notable challenges in popular culture to the dominant stigmatising discourse around welfare, demonstrating that the negative narratives espoused in poverty porn television and other media coverage are not the only stories being told. Ken Loach's Bafta-winning film *I, Daniel Blake* (2016) arguably showed a 'realistic depiction of life on benefits' (Ryan, 2017), revealing the impact of increasingly unjust,

degrading and brutal policies on the lives of welfare recipients. Rather than reaffirming popular stereotypes of benefits claimants, Loach's protagonist was an ordinary, honest and hardworking man who had fallen on unfortunate circumstances. Nonetheless, some, including tabloid journalists and Jobcentre staff, have disputed the accuracy of this depiction. For instance, *Daily Mail* journalist Toby Young (2016) argued that 'only Lefties could go misty eyed at a movie that romanticises Benefits Britain'. Such accusations could be read as an 'ongoing attempt to dismiss what is being done to vulnerable people in Britain's toxic social security system' (Ryan, 2017). Resistance is further explored in the following section in regard to how qualitative research provides a counter-narrative to stigma.

3.4.2 Researching poverty and welfare reform

Qualitative research provides a powerful challenge to the dominant stigmatising discourse surrounding benefit claimants as it allows individuals to narrate their own feelings and lived experiences, rather than be spoken for and about (MacDonald *et al.*, 2014; Boland and Griffin, 2015; Lister, 2015). In stark contrast to stigmatising media portrayals and policy narratives which position benefits claimants as living a life of luxury at the expense of the taxpayer, qualitative research with those affected by poverty and welfare reform challenges this dominant discourse by exposing the considerable emotional and financial costs that such reforms incur (*inter alia* Hamilton, 2012; Shildrick and MacDonald, 2013; MacDonald *et al.*, 2014; Garthwaite, 2016; Patrick, 2017a; Shildrick, 2018).

For instance, empirical evidence provided by Shildrick *et al.'s* (2012) longitudinal research with people living on low incomes in Middlesbrough identified what they called the 'low-pay, no-pay' cycle whereby, in the absence of stable, secure work, a growing proportion of people persistently 'churn' between unemployment, and *under*employment in low paid, insecure work (often supplemented by meagre benefits), which fails to provide a route out of poverty. Findings from this research also heavily challenged the unquestioned myths commonly touted in anti-welfare media and political rhetoric, of 'intergenerational cultures of worklessness' and unemployed peoples' preference for welfare benefits over work (Shildrick et al., 2012; MacDonald *et al.*, 2014). All respondents placed great emphasis on the social, psychological, moral and financial value of paid work, and many expressed a strong desire to find employment, however they felt they were restricted by a lack of opportunities and alternatives, or a long-lasting route out of poverty (Shildrick et al., 2012; MacDonald *et al.*, 2014). Such findings therefore challenge popular conceptions of worklessness and so-called welfare

dependency as a lifestyle choice. Instead, they highlight the *structural* barriers facing people in poverty, which counter individualising cultural and behavioural explanations, and demonstrate the urgent need for policymakers to recognise and respond to such issues.

Disabled people (Stewart, 2016; Patrick, 2017a; Reis and De Henau, 2018; Ryan, 2019) and those with mental health problems (Dwyer *et al.*, 2020) have been evidenced to be particularly affected. Moreover, research has illuminated the gendered effects of austerity and welfare reform (Annesley and Bennett, 2011; Griffiths, 2017; Millar and Ridge, 2017, 2018; Greer-Murphy, 2018; Reis, 2018a, 2018b), and the intersections of race and ethnicity (Hall *et al*., 2017) and disability status (Reis and De Henau, 2018) with such gendered inequalities. Alongside and in connection with the grinding, everyday forms of hardship imposed by austerity-driven welfare reforms, such reforms have been attributed to a substantial number of deaths and suicides (Mills, 2018; Grover, 2019), leading commentators to term austerity an insidious form of 'institutional violence' implemented in a legitimate way by those in power (Cooper and Whyte, 2017b, p.23). In the context of ongoing reform, further examining the lived experiences of those most affected by stigma-driven reforms remains of crucial importance (Tyler, 2020).

An important aspect of existing qualitative research in this field research has been the emphasis on how stigmatised groups manage and resist stigma, including valuable insights about how mothers experience and cope with stigma (Hamilton, 2012; Shildrick and MacDonald, 2013; Patrick, 2016; Pemberton *et al.*, 2016). Indeed, rather than merely being 'passive recipients of stigma' (Link and Phelan, 2001, p.378) scholars have pointed to the tendency of stigmatised groups to develop forms of agency and resistance using the resources available to them (Link and Phelan, 2001; Lister, 2004; Tyler, 2020). Contemporary stigma scholarship highlights the *continued* need to investigate how stigma is experienced and challenged, particularly in the current context of widening inequalities, amplified stigma and ongoing welfare reform (Tyler, 2020).

Alongside the trend of increasing stigmatisation of benefits claimants there have been some notable challenges to such stigmatising narratives and policy shifts within popular culture and through collective social movements. Research has revealed the lack of clarity and consistency behind sanction decisions and the considerable financial hardship that benefit sanctions can inflict on claimants (Patrick, 2017a; Watts *et al.*, 2014; Dwyer and Wright, 2014; Garthwaite,

2016). Hence, forms of collective resistance have emerged such as Unite the Union's (2017) National Day of Action against benefit sanctions, arguing that rather than encouraging people into work, sanctions are 'cruel' and plunge vulnerable people into poverty. Additionally, there has been resistance, both in and outside parliament, to the continual rollout of Universal Credit amidst concerns that inefficiencies in its administration will exacerbate hardship for claimants (Stewart, 2017; Unite the Union, 2020). Moreover, as highlighted by Mills (2021), disabled activists have sustained a decade of resistance against the draconian reforms to disability benefits in the austerity era.

In terms of research about benefits stigma specifically, Walker (2014) conducted a study into the link between shame and poverty and identified it as cross-cultural phenomenon, indicating the structural nature of such stigma. Moreover, Baumberg's (2016) research is important for highlighting the existence of benefits stigma in Britain and its tendency to operate on multiple levels ('claims stigma', 'stigmatisation' and 'personal stigma'), and Patrick (2016, 2017a) utilises these categories. However, given the extent of evidence about the harms inflicted by welfare reforms, there is need for further qualitative research which explicitly examines experiences of benefits stigma and resistance in the current era, linking austerity-driven reforms with stigma more directly. Furthermore, there is a shortage of empirical research examining women's experiences in this context, and the intersection of gender with other dimensions of inequality. The rationale behind the gendered focus of thesis this is explored in the next chapter.

3.5 Conclusion

Overall, this chapter has situated welfare provision in Britain, both globally and historically, examining key ideological shifts, and highlighting the ongoing pertinence of researching stigma in the current context. Benefits stigma has remained a longstanding feature of British welfare policy, as observed in the workhouse system and the principle of less eligibility, which made conditions intentionally degrading so as to discourage potential claimants. The post-war welfare state, in many ways, signalled a shift away from the residual, punitive model and towards a more universal conception of citizenship rights provided by the state, which showed affinity with Esping-Andersen's (1990) social democratic regime-type. Nonetheless, the late 1970s marked the beginning of a significant shift from the post-1945 collectivist principles of welfare, with the rise of the New Right, neoliberal political ideology, signalling a move towards a liberal regime-type. Hence, from this period onwards governments have placed great emphasis on individual rather than collective responsibility for welfare. More emphasis has

been placed on the role of the market in securing a decent standard of living, hence further commodifying people, and promoting further social divisions. Accordingly, welfare benefits have been successively cut, and the receipt of welfare benefits has been made increasingly dependent on the requirement of the individual to meet particular behavioural and market-oriented conditions or face the risk of sanctions, particularly since the unprecedented, austerity-driven reforms implemented by the Coalition government following the 2007/8 financial crisis. Notably, during the austerity era, this punitiveness has been extended to target disabled people. The intersecting inequalities of disability, gender, race and class have been shown to be amplified by welfare reforms in the neoliberal era and particularly under austerity.

Alongside, and in conjunction with such developments, has been the hardening of public opinions towards benefits claimants, influenced by sensationalised media portrayals and, most notably, the growth of 'poverty porn' television in recent years (Jensen, 2014; Jensen and Tyler, 2015; Tyler, 2020). This trend of increasing stigmatisation has not come without resistance; there have been notable campaigns and popular culture representations which directly challenge the dominant stigmatising narrative. Qualitative research has also been extremely important in giving a voice to marginalised groups who are so often spoken *about*, but rarely heard (Lister, 2004). Such research continues to challenge top-down, dominant perceptions through revealing the hardships and structural inequalities faced by people living in poverty and claiming benefits. The resistance strategies exercised by such groups has been an important, but under-researched, area and there is an absence of qualitative research directly exploring the dynamics of benefits stigma and resistance in the contemporary era of unprecedented welfare reform.

Despite the gendered nature of welfare regimes and the gender politics embedded within debates and popular narratives about welfare, social policies tend to be assumed gender-neutral, and there is a shortage of feminist research empirically exploring women's experiences in the current context. This research therefore seeks to illuminate the inherently gendered nature of welfare states through exploring women's engagements with the contemporary UK benefits system. The next chapter therefore critiques the welfare state using a feminist lens, illuminating the consequences of the longstanding omission of women's perspectives from welfare policy design and the influence of classed, gendered and racialised stigma on welfare policies. In its analysis of gender inequality, the chapter takes an intersectional feminist approach,

emphasising the importance of other dimensions shaping and compounding gendered oppression.

Chapter 4: Feminist critiques of the welfare state

4.1 Introduction

Feminist perspectives share the starting point of wishing to illuminate the subordination and discrimination that women face within a patriarchal society (Freedman, 2001). However, a focus merely on gender while ignoring other dimensions of inequality is limiting and exclusory, hence this thesis takes an intersectional approach to understanding how inequalities of gender, class, race and disability converge and compound to produce a system of oppression (Davis, 1981; Crenshaw, 1989; Williams, 1989; Skeggs, 1997; Taylor, 2010). The previous chapter highlighted the primary importance of class in shaping welfare states, welfare policy and stigma, however, gender has traditionally been ignored in analyses of welfare states, with social policies often assumed to be gender-neutral. Moreover, policies introduced to advance women's social position have consistently tended to benefit white, middle-class, able-bodied women, while marginalising other intersections of women's oppression. As touched upon in the previous chapter, contemporary stigma-driven welfare reforms tend to disproportionately impact on socio-economically disadvantaged women (Reis, 2018a, 2018b), particularly Black and Minority Ethnic women (Hall *et al*., 2017), disabled women and carers of disabled children (Reis and De Henau, 2018). This demonstrates the ongoing need to critique the welfare state through a gendered lens, while appreciating the significance of these other axes of inequality.

This chapter therefore critiques the welfare state through a feminist lens drawing attention to the complex and mutually-reinforcing relationship between women and welfare previously neglected in much post-war welfare analysis. Situating women's position within, and relationship to, the welfare state better enables an exploration of women's experiences of stigma in relation to benefits receipt. The chapter is divided into three main sections. The first addresses the historical neglect of gender issues in welfare research and policy drawing attention to the notable contributions of feminist scholars who have highlighted the necessity for a gendered analysis of welfare. It critiques Esping-Andersen's (1990) typology of welfare regimes from a feminist perspective before discussing suggestions for how analyses of welfare regimes can adequately capture the issues and experiences of marginalised women. Leading on from this discussion of the longstanding neglect of women's relationship to welfare in research and policy, the second section will discuss how this genderlessness *matters* in terms of recent welfare policy shifts which disproportionately affect women (particularly working-class, disabled, and Black and Minority Ethnic women). Such groups have been persistently

ignored in policy considerations. In light of the discussion of women's position within the welfare state in the first two sections, the third section then considers the role of stigma in the contemporary welfare state and how this has been understood in relation to gender. In doing so, it considers how gender and class-based welfare stigma may intersect by drawing on the rich contributions provided by research both into the representational field of cultural studies and actual empirical qualitative research conducted with marginalised groups. As well as considering how existing research contributes to knowledge, it will also discuss where research gaps remain. Overall, the chapter aims to illuminate the importance of gender politics within discussions of the welfare state, in the context of increasing stigmatisation and increasingly punitive welfare reforms which disproportionately impact on marginalised women.

4.2 Gender and the welfare state: Ideological underpinnings

Early feminist critiques of the welfare state drew attention to the role of the state in regulating gender relations and contributing to the reproduction of the gender hierarchy. Elizabeth Wilson's (1977) pioneering work defined the welfare state in novel terms, as 'not just a set of services' but 'also a set of *ideas* about society, about the family, and – not least important – about women' who play an essential role within it (Wilson, 1977, p.9, italics my own). Indeed, the post-war welfare state was centred around a particular construction of the family which encompassed assumptions about men and women's roles within the family and wider society. Within the middle-class construction of the modern nuclear family, adult males were defined primarily in relation to their paid employment in the labour market, which was sufficient to provide support to his wife and children, while females were defined first and foremost as homemakers and caregivers to their husbands and children, undertaking unpaid domestic labour (Wilson, 1977; Fraser, 1994). While many families did not fit this ideal of the heterosexual, male-headed nuclear family, it 'provided a normative picture of a proper family' (Fraser, 1994, p.591), and was promoted and reinforced by the state in particular ways.

The modern nuclear family, and women's position within it, developed alongside the social and economic developments of industrial capitalism. In pre-Industrial Britain, the spheres of home and work were not sharply distinguished, physically or socially, and husbands, wives and children typically all worked together (Wilson, 1977, p.17). While wives and children were still regarded as a man's property, the gendered division of labour was relatively undifferentiated (Wilson, 1977). However, the social and economic developments of the Industrial Revolution from the mid-late eighteenth century brought about changes in the

position of women in terms of their conditions of work, their legal status and their ideological role, and social policy reinforced and promoted such changes. Following the birth of industrialisation, women and children, as well as men, worked outside of the home in factories. Factory employment benefited women in some ways, particularly unmarried women and widows, in the sense that it gave them more financial independence so that they no longer had to rely upon the support of family members or parish relief. However, it also meant they became dependent on employers and the labour market (Thompson, 1968), and they were paid less than their male counterparts (Pinchbeck, 1969 [1930]).

However, agitation for reform within the factories during the 1840s centred around restricting women's hours of work and advocating the importance of educating children (Smelser, 1969), thus prompting a shift in women's position. The Factory Acts expanded the definition of a minor to include women (Wilson, 1977, p.19). The focus on the need to protect and educate children reflects the changing status of children during the development of Industrial capitalism. The reduction in infant mortality rates, among other factors, prompted a new middle-class discourse emphasising 'childhood' as a distinct and special phase of the life course (Ariés, 1973). Whereas in the Middle Ages, most babies died during infancy, and children who did survive were treated the same way as adults, during the seventeenth century, children began to be seen as innocent beings, in need of protection and moral education, through socialisation in the home (by mothers), as well as through formal education at school (Ariés, 1973). Such morally-focused views about women and children were also influenced by Evangelical Puritanism (Wilson, 1977). Consequently, although working-class women and children did continue to work outside the home, it 'began to cease being seen as "natural"' (Wilson, 1977, p.19-20). Moreover, as capitalism progressed, a gendered division of labour developed outside of the factory, leaving women excluded from certain occupations such as outdoor farm work, business and finance, and scientific medical training, and confined to others (Wilson, 1977).

Along with changes in women's working lives and legal status which occurred alongside the development of industrial capitalism, came the emergence of their ideological role. For the first time, women were given a 'special ideological status' '*because* they did not work' (Wilson, 1977, p.43, emphasis in original). As the bourgeoisie expanded and their prosperity grew, bourgeois women became a leisure class, whose consumption patterns and domestic surroundings were seen to reflect her husband's wealth and prestige (Wilson, 1977). This

prompted the emergence of a 'conscious, worked-up ideology' of womanhood, 'at the heart of Victorian capitalism' (p.22) which saw a woman's natural place as in the home caring for her husband and children and, in doing so, provided an essential role for the success of capitalism. It was a woman's role to ensure the home was a pleasant place where her husband could relax after a day's work. This 'Victorian ideal of womanhood' (Wilson, 1977, p.26) was not merely confined to bourgeois women, but was incorporated into expectations of working-class women. For instance, William Lovett, the leader of the Chartist working-class political movement, which fought for the vote to be extended to working-class males, advocated the notion of 'a household goddess' whose role was to make the home 'his refuge and his joy' (Lovett, 1856, cited in Wilson, 1977). Owing to this powerful ideology of womanhood, this era signalled the emergence of the idea of a woman's dual roles between paid and domestic labour, where married women who continued to work outside the home were still expected to undertake domestic labour to conform to this ideal (Wilson, 1977, p.20; Barlee, 1863). Such labour was made more arduous owing to the dirt and overcrowding of urban slums in industrial cities (Hammond and Hammond, 1930). For bourgeois women, as well as performing the role of 'the angel in the house', this caring, moral role of was also extended into the public sphere where they were encouraged to undertake voluntary work to educate their working-class sisters on particular issues (Wilson, 1977, p.24).

The male breadwinner family model, and its heavily gendered underpinnings, was supported and promoted by the state through social policy, from early welfare policies to the unprecedented level of state intervention during the post-war period. The provision of a 'family wage' to workers embedded a 'clear view of a gendered division of labour' between males and females (Clarke *et al.*, 2001, p.37), thus institutionally reinforcing gender-based social divisions. The provision of a wage which was sufficient to support a wife and children meant that while male citizenship was conceived in terms of economic independence, females were defined as dependent and were only granted welfare rights on that basis, rather than based on their own autonomous citizenship. The provision of the family wage also supported the dominant ideology that discouraged female participation in the labour market, thus promoting and reinforcing gender inequalities in terms of economic position and status. This model was reliant on the stability of traditional marriage (Lewis, 1997). Poor women who did not fit into the family wage scenario relied on 'paltry, stigmatized [sic.], means-tested aid', which was the remnants of traditional poor relief (Fraser, 1994, p.592). The commitment to full employment

seen in Beveridge's (1942) report 'was assumed to depend on a sole male breadwinner in each household' (Coats *et al.*, 2012, p.37), thus reinforcing this model.

Despite the essential role played by women's unpaid domestic labour, this has tended to be neglected in traditional analyses of welfare states. This may be partially due to the ideological roots of women's role as caregiver, discussed above, making it appear natural, taken-for-granted and thus not open to critique. Moreover, owing to this role being played within the private 'sphere' of the family, where domestic labour is often undertaken in the context of loving and caring relationships, it appears to some as 'alien or even sacrilegious' to see women's work within it as a 'job' undertaken to benefit the capitalist State (Wilson, 1977, p.8-9). Consequently, the private sphere of the home has been traditionally conceptualised as separate and unrelated to the public spheres of work and social policy, so the role of welfare provided within the family, which tends to be gendered, has not been considered relevant, compared to welfare provided by the market and the state (Kolberg, 1991; Langan and Ostner, 1991). This is evident in Titmuss's (1958) classic essay on the division of social welfare in which he analysed welfare provision in terms of state, fiscal and occupational welfare, while omitting any discussion of the indispensable welfare provision by the voluntary sector and the family typically dominated by female providers (Lewis, 1992, 1997).

4.3 Omission of gender issues in welfare research and policy

4.31 Traditional approaches to welfare

The welfare state has typically been conceptualised as a force for social good committed to easing the negative effects of social and market forces by granting social rights to its citizens and promoting greater social equality (Polanyi, 1944; Marshall, 1950; Esping-Andersen, 1990). Nonetheless, this rosy conception arguably omits any consideration of the ideological nature of the welfare state and how it may be underpinned by, and serve to promote, particular ideas about society and its (gendered) citizens. Traditional analyses of welfare states and the concept of the 'welfare regime' have appeared largely genderless in that they have rarely acknowledged gender as a variable for analysis. Titmuss's (1958) typology of welfare states used social class as its key variable for analysis of the relationship between welfare policies and capitalism, while neglecting any explicit mention of gender or 'race' (Lewis, 1997). Arguably, such considerations are equally absent in more recent analyses of welfare states (Langan and Ostner, 1991; Lewis, 1992, 1997) A notable example is Esping-Andersen's (1990) typology of modern capitalist welfare regimes; this bears similarity to Titmuss's (1958) analysis, and again

overlooks any substantial consideration of gender or women (Lewis, 1997), despite the importance of gender relations in shaping and being shaped by the welfare state (Lewis, 1992, 1997; Williams, 1989; Orloff, 1996; Sainsbury, 1999; Cochrane *et al*., 2001).

4.32 Contribution of feminist critiques

In response to the neglect of gender in analyses of welfare states and their policies, feminist scholars since the 1970s have made invaluable contributions to highlighting its significance. Early feminist research emphasised the regulatory role of the welfare state as a form of social control reproducing gender hierarchies (for instance, Wilson, 1977). Alternatively, a second key approach has been to see welfare states as having an ameliorative effect on gender inequalities, comparing factors such as labour market participation, poverty rates and social security spending levels across different countries (for instance, Kamerman, 1986; Goldberg and Kremen, 1990). Nonetheless, Orloff (1996, p.56) argues that these two approaches 'fail to capture the full complexity' of the effects of social policy on gender inequalities because the first, which sees welfare states as oppressive, 'assumes uniformity' and that policies are simply 'imposed on women' (p.56), while the second, which sees them as ameliorative, only looks at one linear dimension when comparing welfare states and their effect on women. Moreover, both approaches are arguably too focused on the capacity of welfare states to impact the position of women and thus neglect women's capacity to influence social policy (Orloff, 1996). Consequently, Orloff (1996) advocates a more dynamic, nuanced approach to gender and welfare, which encompasses aspects of both approaches, emphasising the variation in the effects of social policies on gender. Similarly, Lister (2003, p.170) argues that welfare states are 'deeply gendered institutions' which can 'simultaneously strengthen women's citizenship and reinforce unequal gender relations'. Moreover, women's position within and relationship to the welfare state 'as paid and unpaid providers of welfare and as clients', is arguably more complex than men's, making such analysis less straightforward (Lewis, 1997, p.165).

Understandings of the welfare state have undergone a necessary reorientation to include a focus on gender relations and, crucially, they have gone beyond merely 'making women in welfare states *visible*' in comparative analysis, to making gender the *core* 'dimension' of it (O'Connor, 1996, emphasis my own). Part of this shift has entailed the critique of mainstream analyses of welfare states from a feminist perspective (for instance, Langan and Ostner, 1991), and the amalgamation of comparative perspectives with feminist analyses (for instance, Lewis, 1992; Orloff, 1996) (Sainsbury, 1999). In doing so, feminist scholars have highlighted the dynamic

relationship between gender and welfare, and the importance of gender both as a variable to consider when analysing the *outcomes* of social policies, but also as a tool for enabling an understanding of the very nature and role of welfare states (Orloff, 1996; Lewis, 1997).

4.33 Beyond the 'breadwinner' model: feminist critiques of the contemporary welfare state

Just as gender relations have been argued to be a crucial factor for consideration in the underpinnings and development of the post-war welfare state, contemporary feminist theorists argue for the continued relevance of gender both in spite of and owing to the significant social changes which have taken place in subsequent decades. Indeed, since the Second World War, the male breadwinner family model has significantly declined in the UK. Most notably, women's participation in the labour market has vastly increased (Lewis, 1997). Between 1971 and 2013, the percentage of working women aged 16-64 increased from 53% to 67% (ONS, 2013). Various pieces of legislation since the 1970s have supported this increased participation, including the 1970 *Equal Pay Act*, the 1975 *Sex Discrimination Act* and the 1975 *Employment Protection Act* (ONS, 2013). Moreover, family structures have diversified with an increase in divorce, extra-marital parenthood and lone parenthood (Lewis, 1997). Lone parent families are estimated to make up around a quarter of families with dependent children in the UK, and around 90% are headed by women; these figures have remained the same for over a decade (Gingerbread, 2019). Such changes highlight the ongoing significance of gender in the analysis of welfare (Lewis, 1997).

Although gender divisions in access to paid work have diminished considerably in the sense that greater numbers of women have entered the labour market, perhaps weakening women's dependence on men, there remain notable gender inequalities in pay, status and hours worked (Lewis, 1992, 1997). For instance, women are more likely than men to work part-time (42% vs. 12%), and this has hardly changed in the last 30 years (ONS, 2013), with women who work part-time estimated to be hit the hardest by the gender pay gap (Partington, 2018; ONS, 2021). Additionally, feminist critics have highlighted the gendered division of labour in paid work where women tend to disproportionately undertake caring professions, which tends to be low paid with low status attached to them (Siim, 1987). Moreover, the gendered division of *unpaid* work in the home has been seen to remain stubbornly unchanged, with women currently estimated to carry out an average of 60% more than men (Morris, 1990; ONS, 2016). Responsibility for unpaid work, such as care of children, can be seen to play a determining role

in constraining women's choices about their labour market participation in terms of whether and how much they work (Bruegel, 1983; Folbre, 1994; Lewis, 1997; Reis, 2018b). Hence, the relationship between paid work, unpaid work and welfare is gendered, and analyses of social policy need to acknowledge the interdependence of all *three* aspects (Taylor-Gooby, 1991; Lewis, 1992, 1997).

4.34 Feminist Critique of Esping-Andersen's Typology of Welfare Regimes

Esping-Andersen's (1990) large-scale, comparative study of welfare states primarily focused on the relationship between paid work and welfare while ignoring the significant and interrelated contribution of unpaid work to this dynamic. Esping-Andersen (1990) constructed a typology of welfare regimes - liberal, conservative and social democratic - into which, he argued, most advanced capitalist welfare states can be broadly clustered. However, his analysis omitted any substantial consideration of gender and women's relationship to the welfare state (Langan and Ostner, 1991; Lewis 1992; Lewis, 1997). Among other factors, Esping-Andersen (1990) differentiated welfare regimes based on their capacity for *decommodification*; the extent to which welfare policies enable citizens to maintain a decent standard of living irrespective of their engagement in the labour market and earning capacity granted to citizens 'as a matter of right' and thus independent of 'pure market forces' (Esping-Andersen, 1990, p.3). However, though unacknowledged by the author, the concept of decommodification is arguably gendered (Langan and Ostner, 1991) because the decommodification and resultant political mobilisation of (male) workers can be argued to 'depend as much on unpaid female household labor [sic] as on social welfare policies' (Lewis, 1997, p.162). Decommodification for women, on the other hand, is likely to mean unpaid caring work and resultant '"welfare dependency" to enable 'greater independence of another person, young or old' (Lewis, 1997, p.162). Policies intended to promote decommodification, for example, parental leave, are gendered and can lead to greater gender inequality (ibid.). Moreover, as highlighted by Hobson (1994), while labour market dependence was construed in negative terms in Esping-Andersen's (1990) work, commodification may actually have different meanings for women than men in the sense that paid work has diminished women's dependence on men, given them more autonomy within the family and allowed them to exit from marriage. Such considerations were not acknowledged by Esping-Andersen's (1990) gender-neutral analysis.

Moreover, as well as critiquing the concept of decommodification, feminist scholars have critiqued the other two core dimensions by which Esping-Andersen (1990) differentiates

welfare regimes; state-market relations and de-stratification. His focus on the relationship between the state and the market in the provision of welfare arguably ignores the crucial role played by the family which, as argued by Lewis (1997), ought to be considered as an independent variable for analysis, including an understanding of the implication of transitions in the family for social policy. Feminist research into female poverty and the gendered division of resources have highlighted that merely *including* the family in analysis may not necessarily ensure a truly gender-based analysis; instead, analysis must be more holistic and consider the tensions between the individual, the family and the household, and the assumptions underpinning policies as well as policy outcomes (Glendinning and Millar, 1987; Brannen and Wilson, 1987).

Moreover, Esping-Andersen's third variable for analysis, the capacity of welfare policies to diminish social divisions, focused primarily on social class divisions while neglecting the importance of gender (and race) as a dimension for analysis (Lewis, 1997). Welfare policies are stratified in terms of gender in the sense that men are more likely to receive state benefits owing to their labour market position, whereas when women qualify as workers 'the rules of eligibility may be considerably tighter…than for men', or they may have entitlement instead on the basis of being wives, widows or mothers (Lewis, 1997, p. 163). Moreover, while men predominantly qualify for insurance-based benefits, women, particularly mothers, tend to claim assistance-based social welfare benefits (Lewis, 1997, p.164) which are often means-tested and more associated with stigma.

Feminist analysis has revealed that Esping-Andersen's (1990) interest in the relationship between work and welfare, and how far people were enabled to decommodify their labour, primarily concerns and captures the experiences of men. Hence, typologies of welfare states can be seen to reflect what the researcher considers most important, and countries rank differently according to what factors the researcher highlights as significant so that if one was to apply the gender-specific dimensions of Bradshaw *et al.*'s (1993) study to Esping-Andersen's typology (1990), his country groupings and regime types, the rank of each country would shift dramatically, and the Netherlands would move from the most to the least generous country (Lewis, 1997). The next section will discuss suggestions made by feminist research as to how gender can be adequately incorporated into analyses of welfare regimes, and the methodological issues associated with so doing.

4.35 Suggestions and conclusions from feminist critiques: towards a gender-centred analysis of the welfare state

Alternative typologies of welfare states have been suggested which are 'more gender sensitive' than mainstream analyses and consider the effects of welfare policy on gender relations. Orloff (1993) proposes two new dimensions to capture this; access to paid work, and capacity to form and maintain an autonomous household. Similarly, O'Connor (1993) proposes 'personal autonomy' as a further 'measure of insulation from personal and/or public dependence' (p.166). Nonetheless, adding these measures may not fully capture the complexity of gender relations and women's position within welfare states because they arguably put too much emphasis on financial independence, mirroring earlier studies, without acknowledging the constraints that the gendered division of *unpaid* work poses for women's autonomy (Lewis, 1997). For a 'gender-centered analysis of welfare regimes' (Lewis, 1997, p.166), one must consider the interdependence of all three aspects; paid work, unpaid work and welfare (Lewis, 1992) which remain central issues in the contemporary welfare state. This is a difficult task and poses problems because putting caregiving and unpaid work at the centre of analysis runs the risk of further entrenching assumptions about women's roles rather than promoting gender equality (Cass, 1994; Lewis, 1997). Nonetheless, two core issues remain in relation to unpaid work: 'how to value it and how to share it more equally between men and women' (Lewis, 1997; p.170). Moreover, to further study the relationship between paid work, unpaid work and welfare in current context, it is important to look at 'the possible sources of cash and care and how and why they are combined for different groups of the population' (Lewis, 1997, p.173). As well as looking at differences between men and women, it is also useful to look at differences *between* women, for instance, between married women and lone mothers, and black and white women (Lewis, 1997). In addition to this, examining the experiences of disabled women is essential in the context of amplified hostility towards disabled benefit claimants over the past decade (Ryan, 2019). Hence, analyses must take into account the complexity of women's positions in the welfare state highlighted by feminist research and social policy should therefore aim to 'promote *choice*' for women, in regard to paid and unpaid work, rather than make assumptions about what is '"good" for women' (Lewis, 1997, p.173).

4.4 Women and contemporary welfare policy

4.41 The persistent neglect of gender in welfare policy design

The relative neglect of gender in mainstream analyses of welfare regimes and welfare policy design have important implications for the position of women within the welfare state today. Although the male breadwinner model has declined significantly, the gendered ideological underpinnings of the post-war British welfare state can still be seen to have resonance in the contemporary era (Lewis, 1992; Fraser, 1994; Annesley and Bennett, 2011; Women's Budget Group, 2017). Indeed, in a comparative study of welfare regimes, Lewis (1992) found that Britain has retained the policy logic of the male breadwinner model, with a strong division between the public sphere of paid work, and the private world of unpaid domestic labour. Paradoxically, as highlighted by Lister (2000, p.29) women are 'over-represented as users' of the public welfare system (p.29), yet they are 'under-represented as shapers in the formal policy process' (p.29). Consequently, social policy has been assumed to be gender-neutral, which has been argued to marginalise women's concerns (Lister, 2000). Despite the powerful contribution of feminist scholars to theoretical debates about welfare, their acceptance into mainstream social policy has only been relatively marginal (Williams, 1989). In this context, contemporary welfare states do not adequately protect and cater for women's and children's needs (Williams, 1989; Lister, 2000; Fraser, 1994; Ridge and Millar, 2008; Griffiths, 2017; Millar and Ridge, 2017; Reis, 2018a, 2018b).

As a result of the gender-blindness of welfare policy, recent UK policy shifts in the arena of welfare have been found to disproportionately affect women. Increasing welfare conditionality over the past decade has affected lone parents in particular, the vast majority of whom are female (Webster, 2014; Johnsen, 2016; Millar and Ridge, 2017, 2018). Whereas previously lone parents were not obliged to seek paid employment until their youngest child reached school age, policy shifts such as the introduction of Mandatory Work-Focused Interviews (WFIs) in 2001, and Lone Parent Obligations in 2008, have made active attempts to seek work a mandatory requirement (Johnsen, 2016). Lone parents' right to claim Income Support which, since its introduction in 1988 has been the main has been the main benefit provided for lone parents, has been eroded significantly (Lakhani, 2011). Consequently, the last decade has seen an increase in the proportion of lone parents who work, from 55.8% to 64.4% (Gingerbread, 2019).

This increasing work-related conditionality is underpinned by ideas around welfare dependency and lack of work ethic while at the same time ignoring the gendered structural and

personal barriers to employment (Johnsen, 2016) such as the constraints that caring responsibilities may pose. Millar and Ridge's (2017) longitudinal qualitative research with lone mothers and their children tracked the transition from out-of-work benefits to employment supported by tax credits (prompted by increasing work-related conditionality), looking at impact on family life and living standards for mothers and children and how they negotiate everyday challenges brought about by low-income employment. The research revealed increasing pressures on family life caused by having to balance caring responsibilities with (low paid) work and in-work conditionality. Moreover, accompanying the intensification of work-related conditions has been the increase in sanctioning for perceived non-compliance with such requirements. The sanctions system bears down heavily on lone parents (Webster, 2014) as it does not allow for the flexibility that they may require and results in them facing sanctions (Johnsen, 2016). Moreover, many lone parents, particularly those considered vulnerable, have reported not understanding the requirements put on them, and being penalised under the assumption that their non-compliance is deliberate (Johnsen, 2016). Sanctions, and even the threat of sanctions, has been found to cause extreme anxiety and negative outcomes for lone parents and their children (Johnsen, 2016).

Similarly, the introduction of Universal Credit from 2013, announced in the 2011 *Welfare Reform Bill*, can be seen to further entrench gender inequalities and disproportionately impact female claimants in particular ways (Annesley and Bennett, 2011). Its introduction represents the most significant overhaul of the UK welfare system since the establishment of the post-war welfare state (Royston, 2012), designed to simplify the existing benefits system and 'make work pay' by increasing incentives for claimants to move into paid work (Annesley and Bennett, 2011; Women's Budget Group, 2017). It consolidates six types of means-tested benefits and tax credits into a single benefit, based on income, assets and circumstances, paid monthly (Millar and Bennett, 2017, p.2). However, this has gendered implications as it increases financial incentives for one person in a coupled household to move into paid employment, while weakening incentives for 'second earners', who are more likely to be women (Annesley and Bennett, 2011; Women's Budget Group, 2017; Griffiths, 2018). Accordingly, this is argued to risk reinforcing a '"male breadwinner model" in which men do paid work and women stay at home to look after children and other dependants', thus increasing gender inequalities by restricting women's access to an independent income (Annesley and Bennett, 2011, para. 4). Moreover, the transition to a single monthly payment is argued to make

household budgeting more difficult, thus impacting women more than men because women tend to manage household budgets and day-to-day spending (Annesley and Bennett, 2011; Fawcett Society, 2020). Evidence suggests that women are also likely to be the most affected in households when money is scarce (Fawcett Society, 2020), therefore the policy demonstrates 'an ignorance or wilful blindness to gendered power inequalities and intra-household distribution' of resources (Annesley and Bennett, 2011, para. 9).

Changes to Universal Credit, such as the Benefit Cap and '2-child limit', alongside a series of other cuts and changes to benefits and tax credits, also disproportionately impact female claimants, both those in work and out of work, due to gendered patterns in welfare, work and care (Reis, 2018a, 2018b). Moreover, families with children are more likely to be impacted by such policy changes than households with no children, particularly lone parent families and one-earner couples with three or more children (Hall *et al.*, 2017; Reis, 2018a). Furthermore, gender and class inequalities compound and intersect with racial inequalities, therefore Black and Minority Ethnic women are especially vulnerable to such austerity-driven cuts and shifts to benefits and tax credits (Hall *et al.*, 2017). Disability also acts as another intersecting dimension of oppression, whereby disabled women and women with disabled children continue to be disproportionately impacted by welfare reform (Reis and De Henau, 2018). Such shifts have occurred alongside and in relation to an increased stigma attached to welfare. The next section will discuss the gendered elements of such stigma.

4.5 Classed and gendered stigma

4.5.1 Welfare policy and the stigmatisation of lone mothers

As discussed in the previous chapter, poverty, low socioeconomic position and reliance on social welfare have long been associated with stigma and shame with policies persistently designed to distinguish between the deserving and supposedly undeserving poor (Walker, 2014). However, owing to the gendered interrelationship between welfare, paid employment and unpaid care (Lewis, 1997), the longstanding stigma associated with social security reliance in market-oriented, 'liberal' welfare regimes (Esping-Andersen, 1990) such as Britain also manifests in gendered forms. Lone mothers, particularly those who rely on state support, have long been subject to shaming and stigma owing to gendered moral judgements about their supposed lack of respectability, coupled with concerns about the financial burden they and their 'illegitimate' children present (Bottero, 2011; Carroll, 2017). Consequently, lone mothers have been persistently perceived as undeserving of support (Song, 1996, p.380). The stigmatisation

of lone mothers in welfare policies can be traced from the 16th Century Poor Laws (Adair, 1996), the 1834 Poor Law Amendment Act which punished and shamed unmarried mothers (Carabine, 2001), the post-war welfare state which was designed around the normative nuclear family (Lewis, 1997) and the fierce reinvigoration of such gendered stigma in the 'underclass' debates of the 1980s and 1990s, and beyond (Prideaux, 2010; Jordan, 2014; Evans, 2016; Carroll, 2017).

The revival of gendered welfare stigma during the neoliberal era can be linked to several developments since the 1970s; the breakdown of the post-war welfare state, the widespread feminisation of labour and the diversification of family structures (Lewis, 1997). In this context, right wing political commentator Charles Murray's (1984; 1990) 'underclass' thesis proposed that the proliferation of "welfare dependent" female-headed households were the product of an overgenerous "nanny state" and were responsible for socialising their "illegitimate" children into a so-called 'dependency culture'. As discussed in chapter 3, this ideology was extremely influential in shaping the radical changes to the UK social security system under Thatcher and has resonated in the policies enacted by every subsequent government with the underlying aim being to discourage single parenthood and so-called welfare dependency.

Women – particularly working-class women – have been forced to depend on flexible, insecure forms of work to fit around caring responsibilities and/or means-tested benefits strongly associated with stigma (Lewis, 1997; Fraser, 1994). The concept of female deservingness has long been tied to the idea of 'respectability' where 'women have to be "good" and "respectable" to deserve public assistance' (Evans, 2016, p.438). Since the breakdown of the post-war welfare state, the notion of female respectability and deservingness has become associated with engagement in the labour market - a new form of the deserving female poor (Evans, 2016). This is reflected in the increasing work-related obligations placed on lone parents during the last decade and the stigmatising rhetoric around 'large' families legitimising increasingly punitive policies such as the '2-child limit' and Benefit Cap (Jensen, 2018).

4.5.2 Stigma and representations of the female poor

As well as promoting class-based dualisms, the popular stigmatising myths around poverty and welfare contain significant gendered aspects. The underclass discourse is extremely gendered, owing to its heavy victim-blaming focus on never married lone mothers deemed responsible

for reproducing the supposed underclass (Mann and Roseneil, 1994). Following the murder of James Bulger in 1993, the media and policy rhetoric focused heavily on the issue of fatherless families whereby the supposedly inadequate socialisation provided by lone mothers was seen to give rise to delinquent behaviour and social problems (Mann and Roseneil, 1994; Roseneil and Mann, 1996). This media and policy discourse about the underclass 'dichotomized women along age-old lines - good women who do the right thing, get married and have children, versus bad women, who have children, don't get married and depend on state benefits' (Roseneil and Mann, 1996, p.192). Similarly, the "welfare queen" legend, popularised by Reagan in the 1970s, presents another example of the gendered and racialised nature of benefits stigma (Hancock, 2004; Allen *et al.*, 2015); the '"welfare queen" was a mythical woman, usually portrayed as black and swathed in furs, who drove her Cadillac to the welfare office to pick up a dole from the government that amounted to $150,000 a year, tax-free' (Meek, 2016, para. 12).

Since the 1980s, and particularly the austerity era, the dominant depiction of poor women in media and political discourse has increasingly become that of the 'benefits scrounger' (Evans, 2016, p.438) or 'welfare mother'; 'a lazy, feckless burden on the state and its benefits' (p.439). This contrasts with the 'highly moralised' Victorian images seen in art, literature and the printed press which depicted women as helpless and deserving of sympathy and assistance (Evans, 2016, p.438). Rather than invoking sympathy, this contemporary construction of the female poor arouses disapproval and disgust, and legitimises punitive policies (Tyler, 2013, 2015; Allen *et al.*, 2014; Evans, 2016).

As discussed in the previous chapter, in the contemporary era, in addition to tabloid newspapers, such images of poverty are seen in the hugely popular so-called 'reality' television programmes, such as *Benefits Street, Nick and Margaret: We All Pay Your Benefits, Benefits Britain: Life on the Dole, Skint* and *The Scheme.* Producers of such programmes purport to depict the 'reality of life on benefits' (Love Productions, 2014), but are carefully edited in such a way as to provoke public fascination and disgust, and have thus been branded as 'poverty porn' (Jensen, 2014), 'austerity porn' (Allen *et al.*, 2014) or 'factual welfare television' (De Benedictis *et al.*, 2017). Indeed, in the context of increasing austerity, programmes such as *Benefits Street* can be seen to operate 'through forms of classed and gendered shaming' to legitimate increasingly punitive welfare reforms (Allen *et al.*, 2014, abstract). Benefit Street's Deirdre Kelly, nicknamed 'White Dee', has been argued to represent the female 'skiver' whose

‘reproductive capacity and caring labour is framed as idleness and a drain on national resources’ (Allen *et al.*, 2014). This framing is solidified through the inclusion of ‘judgement shots’, such as the zoomed in image of an ashtray full of cigarette butts (Allen *et al.*, 2014, section 1.1-1.2). This contemporary construction of the undeserving poor woman ‘has become entrenched in the popular imagination and in government policies as a reality, as a defined and likely inhabitant of real communities’ (Evans, 2016, p.439). Accordingly, politicians talk about these ‘abject figures’ (Jensen, 2014, section 2.6) as though they portray reality, and they therefore serve the function of making the welfare cuts and the increasingly tough stance to welfare provision appear fair and necessary (Jensen and Tyler, 2015). This symbiosis between powerful media and state interests in the production of stigma is a core example of the interdependent cogs of the ‘stigma machine’ operating together to legitimise and reproduce inequalities (Tyler, 2020, p.260).

Empirical research with women at the receiving end of such stigmatisation has revealed the impact that such labels can have on their identities and lived experiences. For example, informed by a symbolic interactionist approach, Rogers-Dillon (1995) examined the dynamics of welfare stigma among women in the USA. Furthermore, Skeggs’ (1997) ethnographic research with working-class women revealed feelings of devaluation and a desire to become ‘respectable’, reflecting longstanding moral judgments on poor women. This theme of wanting to appear respectable in response to stigma has been echoed in subsequent research with mothers living on low incomes, where mothers have been found to manage stigma through considerable self-sacrifice to ensure their children are provided for (Hamilton, 2012; Shildrick and MacDonald, 2013). Nonetheless, given the evidence consistently highlighting the gendered impacts of austerity and welfare reform outlined in this chapter, and the associated gendered forms of stigma, there is a shortage of empirical research specifically examining women’s experiences in the current era. In the context of hardening public attitudes alongside ongoing stigma-driven welfare reforms disproportionately impacting on women and disabled people, understanding lived experiences is of crucial importance.

4.5 Conclusion

This chapter has critiqued the welfare state through a feminist lens highlighting the persistent neglect of gender and women’s concerns within policy analyses of the post-war welfare state (for example, Marshall, 1950; Esping-Andersen, 1990), and the significant contribution of feminist scholars (*inter alia* Wilson, 1977; Langan and Ostner, 1991; Fraser, 1994; Lister,

2003) in redressing such an absence. Rather than being gender-neutral, feminist scholars have highlighted the deeply gendered nature of welfare states (Lister, 2003). Notably, such critiques have drawn attention to the hitherto unacknowledged gendered assumptions underpinning the design of the post-war welfare state, (Wilson, 1977; Langan and Ostner, 1991; Fraser, 1994; Lewis, 1997). As discussed, these critiques have ongoing relevance and implications in the contemporary welfare state where policies are assumed to be gender-blind and therefore women's concerns remain marginalised and welfare policies continue to reinforce gendered assumptions (Williams, 1989; Lister, 2000; Ridge and Millar, 2008; Millar and Ridge, 2017; Griffiths, 2017; Women's Budget Group, 2017).

Following a discussion of the gendered implications and risks of contemporary welfare policy, the chapter then explored the associated concept of stigma and its gendered manifestations. This began with outlining the persistent marginalisation of lone mothers within early state interventions to manage the poor through to the contemporary era where the role of New Right ideology and the 'underclass' thesis in reigniting the stigmatisation of lone mothers was highlighted. The chapter then discussed the policy implications of such stigmatisation before outlining the role of media representations and contributions from empirical research about the lived experiences of classed and gendered welfare stigma. Owing to the longstanding neglect of women's issues in discussions of welfare, coupled with the gendered nature of benefits stigma, this is an important area where further knowledge is needed, particularly in the current context of ongoing stigma-driven welfare reforms. This thesis therefore explores women's experiences and perspectives in the current context using an intersectional feminist approach which will be discussed in the next chapter.

Chapter 5: Research methods and methodology

5.1 Introduction, aims and research context

This chapter outlines and justifies the methodology and methods adopted in this PhD research exploring the gender politics of contemporary benefits stigma. Before discussing the epistemological, methodological and ethical approaches adopted in this project, I recap firstly on the research objectives which are situated and justified with a discussion of the wider research context and rationale. This project sought to examine the dynamics of stigma and resistance in the lives of women who rely on social security benefits, using semi-structured interviews. The overarching research question was therefore, "*how does stigma manifest in the lives of women engaged with the social security system?*". More specifically, the aims of this research were to:

1. Explore the mechanisms of stigma operating in the lives of women claiming benefits
2. Examine the extent to which the benefits system's design and ongoing welfare reform shape and contribute to stigma
3. Understand how stigma manifests on an everyday level in social interactions and self-perceptions
4. Examine the ways in which such stigma is managed and resisted
5. Better understand the divisive politics of stigmatisation and stigma's function as a classificatory form of power in the contemporary era.

My desire to explore and uncover the mechanisms of stigma in the lives of women claiming benefits stemmed from an awareness of two interconnected and simultaneous developments discussed in depth in Chapters 2, 3 and 4. Firstly, the unprecedented scale of austerity-driven reform to the British social security system over the past decade and the disproportionate impact reforms had on women and disabled people, and secondly, related to this, the amplification of benefits stigma in political rhetoric, media narratives and public attitudes (Baumberg *et al.*, 2012; Taylor-Gooby, 2015; Tyler, 2020). Stigma as a concept has witnessed a sociological revival in recent years with scholars critiquing its apolitical and ahistorical usage in the twentieth century (Goffman, 1963) and instead reconceptualising it as a form of classificatory power utilised to maintain and amplify unequal social, political and economic

relations (Tyler, 2020). This understanding of stigma allows us to see and interrogate the instrumental role of stigma in legitimating the retrenchment and reform of the welfare system under austerity, and its disproportionate impacts on vulnerable groups (Tyler, 2020). In this context, I identified a need to better understand how the stigma attached to benefits receipt operates, and how it is understood, experienced and resisted by those on the receiving end of it.

Furthermore, my focus on women's experiences stemmed from evidence pointing to the disproportionately gendered impacts of austerity and welfare reform on women (Reis, 2018a; Alston, 2018), facilitated by the absence of women from policy design, despite their paradoxical overrepresentation as users of the state welfare system (Lister, 2000). Converging with gender-related inequality I was also aware of the importance other interrelated axes of oppression, such as class, race and disability. My research focus was motivated by my awareness of the persistent stigmatisation of the female poor (Song, 1996) and the ways such stigma is mobilised in the current era to justify punitive policy interventions (Tyler, 2008; Evans, 2016). Consequently, I saw a need to investigate stigma from a female perspective using a feminist epistemological, methodological, and ethical approach. This approach holistically informed and influenced my entire research design and process, as is discussed throughout this chapter.

This chapter is structured into three sections: a discussion of the philosophical assumptions of feminist epistemology which underpinned the research; a reflective account of the research design, methodology and method of data collection and analysis; and lastly, a discussion of the ethical precautions taken to protect my participants and myself as a researcher. The chapter is written in the first person, in recognition of the 'situated', subjective nature of sociological knowledge, and allowing the reflexivity that characterises feminist epistemology (Haraway, 1988) to be exemplified throughout.

5.2 Philosophical underpinnings: Feminist research

5.2.1 Feminist epistemologies and the politics of knowledge production

The process and practice of social research requires researchers to grapple with epistemological considerations concerning the very nature and legitimacy of knowledge and, following this, methods of attaining such knowledge (Babbie, 2010; Greener, 2011; Bryman, 2016). As illuminated by feminist scholars, knowledge, its validity and its pursuit, are matters inherently

tied up with questions of power, and until the 1970s was male-dominated and narrowly defined (Harding, 1987b; Harding, 1991). Owing to my desire to understand stigma from the perspective of women relying on social security benefits, underpinning my research with a *feminist* theory of knowledge and corresponding feminist methodology was highly appropriate. Rather than developing one unitary theory to explain the position of all women in an essentialist, monolithic way, feminist research recognises that 'not all women have the same conditions or experiences' (Harding, 2004, p.8), and seeks to 'provide a framework which is capable of accommodating the diversity of women's lives' (Daly, 2000, p. 62). This was important as I wanted to ensure that my research approach could capture the complexities and nuances in the women's experiences, and the role of multiple intersecting axes of oppression besides gender, such as class and disability.

Feminist epistemologies and methods were only developed during the second wave of the feminist movement prior to which women were systematically excluded from the realm of knowledge-production and denied authority as legitimate *knowers* (Oakley, 1974; Code, 1981; Harding, 1987a, 1987b). As such, traditional Anglo-American scientific and sociological theories were gender-blind, constructed by and about men of the dominant race and class and underpinned by male-centric research principles (Oakley, 1974; Harding, 1987a, 1991; Smith, 1991). The existing male-centric framework for social enquiry therefore excluded the possibility that women could be legitimate knowers or producers of knowledge while also rendering women's lives and inequalities invisible or else misrepresenting their realities, (Oakley, 1974). Hence, rather than merely *adding* women to the existing androcentric epistemological framework, feminist researchers in the 1970s began to debate and develop a *distinctive* feminist epistemology that would both enable women's lives to be acknowledged as valid sites from which legitimate knowledge could be drawn, and a methodological approach which would allow gender inequalities to be exposed and challenged (Code, 1981; Harding, 1987b, 1991). As will be discussed, through an exploration of feminist theories of knowledge and associated methods I concluded that such an epistemological and methodological approach was most appropriate for my research with women reliant on social security benefits.

Unlike traditional positivistic approaches which assumed knowledge to have legitimacy only if it was discovered by a supposedly detached, impartial observer, feminist researchers reformulated understandings of knowledge as always contingent, subjective and situated in everyday experience (Harding, 1987a, 1991; Haraway, 1988; Smith, 1991). Furthermore, the

lived experiences of groups affected by interlinking forms of oppression were understood to offer particular 'epistemic privilege' as the starting point for gaining knowledge about the social world (Doucet and Mauthner, 2007, p.37). The insights of such groups were considered to constitute a unique perspective of the world from the standpoint of a group whose shared experiences are shaped by their subordinate social position (Smith, 1987; Hartsock, 1987; Haraway, 1988; Collins, 1990). Furthermore, 'the vantage points of the subjugated' were recognised as offering a more trustworthy vision of the world than privileged groups because their accounts are more likely to enable a critical interrogation of the dominant mechanisms of power and knowledge which structure the social world (Haraway, 1988, p.583). Hence, in a capitalist society structured according to patriarchal and colonialist values, feminist researchers saw marginalised women's lives as a critical source of knowledge through which to critique such conditions (Hartsock, 1987).

This feminist 'standpoint theory' fits within a feminist paradigm, a *conflict* paradigm which 'views human behavior [sic.] as attempts to dominate others or *avoid* being dominated by others' (Babbie, 2010, p.36, emphasis added), which was pertinent for my research owing to my focus on how working-class women negotiate and avoid stigma. Examining and understanding the social world from a feminist paradigm draws attention to areas of social life overlooked and unseen by other paradigms, for instance, gender differences and how they play out in the organisation of society, highlighting women's oppression, and exposing the shortcomings of other paradigms (Babbie, 2010, p.39). Such an approach therefore allows and encourages marginalised voices to be at the fore, which was highly pertinent for my research with women in receipt of social security benefits whose voices are persistently ignored and misrepresented.

While, as Haraway (1988, p.584) warns, this approach of privileging the knowledge of the oppressed comes the 'serious danger of romanticizing and/or appropriating the vision of the less powerful while claiming to see from their positions' in a simple, unproblematic way, using this approach carefully and reflexively can have the potential to transform dominant 'systems of knowledge and ways of seeing' (Ibid.). When applied to the context of poverty and welfare, this has relevance as the voices and perspectives of benefit claimants and people living in poverty are persistently silenced and distorted by the dominant stigmatising rhetoric in media, political and public consciousness (Lister, 2004; Shildrick, 2018; Tyler, 2020). As shown in chapter 4, working-class women and disabled people have been subject to misrepresentation

and stigma, and spoken for and about, but are rarely given the opportunity to be listened to. An approach which privileges the unique knowledge that this group can offer was therefore highly appropriate. My starting point was a desire to recognise and reinforce the legitimacy of the knowledge of my participant group, women who rely on social security benefits (some of whom are disabled), whose voices are so often muted and misrepresented. Moreover, using such accounts I wanted to critically theorise their experiences of intersecting forms of oppression, examine resistance strategies, and therefore help to challenge the persistent stigma and misrepresentation that they may face.

As highlighted by Stanley and Wise (1983, p.18, emphasis in original), owing to a common "feminist consciousness" gained through shared experiences of 'being, and being treated as, *a woman*' in a patriarchal society, in conjunction with the hitherto marked absence of women as knowers, feminist research ought to be conducted '*by* women' (p.18, emphasis in original). Knowledge production through 'woman-to-woman talk' has been argued to help women feel more comfortable in expressing themselves openly and help to diminish the power imbalance between the researcher and participant (Spender, [1980] 1990, p.111).

Nonetheless, this notion of a shared demographic such as gender simplistically enabling naturally-occurring rapport and the most honest data elicitation, and alleviating the unequal power relationship between researcher and participant, has undergone critique. Phoenix (1994, p.50), for instance, argues that 'simply being women discussing "women's issues" in the context of a research interview is not sufficient for the establishment of rapport and the seamless flow of an interview'. Furthermore, Phoenix (1994, p.50) suggests that the notions of 'cosiness' between researcher and participant in feminist interviewing based on shared gender only, ignores the role of other social divisions such as social class, race, ethnicity, age, disability, sexual orientation and politics, which may simultaneously impact on the interview power dynamics. Moreover, the taken-for-granted assumption of a shared perspective of the world because of gender may also limit discussion rather than further aid openness (Phoenix, 1994), and may prevent the researcher from acknowledging or reflecting upon their role in the research and data collection. Consequently, in my own research, I was aware of the need to avoid slipping into essentialist, homogenising assumptions about shared *women's experiences*, instead taking a cautious, reflexive and critical approach and continually acknowledging my power and positionality in shaping the research and interview dynamics.

5.2.2 Feminist methodologies and methods

Rather than producing a singular method, feminist scholarship has opened up a methodological approach which is informed by the epistemological foundations discussed in the previous section. Despite divisions in opinion concerning how to address the existing problems and omissions of mainstream epistemology (Harding, 1991), and recurring questions around the true distinctiveness of a feminist methodological approach, there are some well-established central tenets that have emerged from feminist scholarship which unite and characterise feminist research as distinct from conventional, traditional paradigms, methods and practices (Doucet and Mauthner, 2007). My research fits with these characteristics.

Firstly, feminist research shares the ontological starting point understanding the social world as 'unequal and hierarchical' (Skeggs, 1994, p.77), and seeks to critique and challenge inequalities, particularly on the basis of gender (Ramazanoğlu and Holland, 2002). Secondly, as discussed in the previous section, the development of feminist epistemology has entailed the redefinition of what counts as valid knowledge which in turn has implications for methods of knowledge production; 'feminist researchers have actively engaged with methodological innovation' and challenged conventional positivist methods of data collection and analysis (Doucet and Mauthner, 2007, p.40). A third defining feature of feminist research is that it is conducted 'for and with women' (Daly, 2000, p.62; see also Stanley and Wise, 1983; Smith 1987; Fonow and Cook 1991a; Ramazanoğlu and Holland 2002), enabling women to express their points of view in an ethically-grounded, reciprocal process of shared knowledge production which includes and involves them and offers emancipatory potential (Smith, 1979, 1987; Oakley, 1981; Stanley and Wise, 1983; Hartsock, 1987; Daly, 2000).

Doucet and Mauthner (2007) argue that in addition to these three well-established aspects, power and reflexivity are also essential issues to consider critically in the process of conducting feminist research. Indeed, feminist research aims to recognise and mitigate against unequal power relations between researcher and participant based on gender, race, class and other social divisions (Stanley and Wise, 1983). Oakley (1981, p.50), for instance, drawing upon her research with expectant mothers, claimed that feminist interviewing differed from conventional interviewing in the sense that it sought to establish a 'non-hierarchical' relationship between researcher and participant whereby the researcher is willing to share aspects of their own identity with the participant in a reciprocal fashion. In addition to and in conjunction with an awareness of power dynamics, reflexivity is another central aspect of feminist research; this

can be defined as 'the tendency…to reflect upon, examine critically, and explore analytically the nature of the research process' (Fonow and Cook, 1991b, p.2). This includes retaining a reflexive acknowledgement of the positionality of the researcher impacting on the research, rather than the researcher claiming to be a distant, detached and neutral observer (Haraway, 1988). These core interrelated aspects of power and reflexivity will be discussed and reflected upon in more detail in the rest of the chapter, particularly in section 5.5.4, with reference to how they have shaped and played out in my research with women engaged with the social security system.

5.3 Research design and method

5.3.1 Qualitative research design

In order to adequately explore the experiences and perspectives of women engaged with the social security system, I adopted a qualitative approach. This approach was selected because of its ability to gather rich, descriptive and meaningful data (Gubrium and Holstein, 1997) thus enabling an understanding of how women in this context make sense of their lives and the role of stigma. Unlike quantitative methods, qualitative methods enable researchers to 'capture more naturalistically what research participants wish to express because they are able to use their own words', rather than remain confined to pre-determined categories or tick-boxes (Greener, 2011, p.3). Qualitative methods allow participants to construct their own meanings in their own words, which is a key reason why such methods have been favoured by feminist researchers; they create a space for women to speak about their everyday experiences, thus challenging the hitherto male-centric assumptions about what counts as valid knowledge and methods of knowledge production and, in doing so, resist gendered oppression (Oakley, 1981; Doucet and Mauthner, 2007).

5.3.2 Qualitative interview methods and the lived experiences of poverty and social security receipt

As discussed in chapter 3, qualitative interviews have proved an extremely valuable method for allowing the lived experiences of marginalised individuals and groups to come to the fore and be recognised as valid sources of knowledge about the social world. Indeed, interviews with people living in poverty and in receipt of benefits challenge common sense assumptions about these groups and, at the same time, reveal counter-narratives of resistance. For example, through their semi-structured, biographically focused, qualitative interviews with people living on low incomes in Middlesbrough and Glasgow, Tracy Shildrick and colleagues' research

challenged dominant stigmatising narratives about 'the poor' and unemployed and instead revealed the everyday realities and structural constraints facing such individuals (Shildrick *et al.*, 2012; MacDonald *et al.*, 2014). Moreover, Ruth Patrick's (2017a) longitudinal qualitative research with benefit recipients demonstrated the stark mismatch between popular assumptions and the lived realities of people living through unprecedented welfare reform. Qualitative interviews have therefore been shown to allow stigmatised groups to speak for themselves, rather than be spoken for or about, thus challenging existing dominant narratives and forms of common-sense.

As well as being a fruitful method in researching with individuals living on a low income, interview methods have also been valuable in researching the intersection of class and gender inequalities in women's lives. In her research in the North East of England, Beverley Skeggs (1997) utilised interviews with young working-class women about their life choices and identities. This method facilitated rich accounts of women's lives and exemplified the complex intersection of gender and class inequalities. Moreover, Greer-Murphy's (2018) research with mothers in Stockton-on-Tees living through austerity used qualitative interviews effectively, along with ethnographic methods, to illuminate the gendered lived experiences of austerity.

Consequently, I considered interviews to be highly effective in enabling me to fulfil my research aims of gaining a rich insight into the everyday experiences and perceptions of women engaged with the social security system, informed by an intersectional feminist approach. More specifically, I considered interviews a valuable method to allow me to examine how stigma is understood and resisted in their everyday lives and to contextualise stigma in the wider structural context of gender, class and disability politics, and against the backdrop of ongoing welfare retrenchment and reform. The ability of qualitative interviews to generate such contextual, nuanced and detailed knowledge is supported by Mason (2018, p.112).

I considered that a structured interview would not offer enough flexibility for participants to share their nuanced perspectives, whereas a semi-structured interview would be loosely led by a range of topics to be covered while allowing space for participants to guide much of the discussion at the same time (Robson, 2011; Bryman, 2016). I formulated a topic guide (see Appendix 4) which was designed in light of my research around stigma for chapters 2-4. Developing my interview schedule entailed reflecting on my research objectives and questions, and philosophical approach, to ensure the relevance of what is discussed without constraining

or imposing upon the participants' responses (Bryman, 2016; Mason, 2018). I wanted my topic guide to allow their benefit-claiming stories to be situated within the wider context of their lives rather than be assumed to be the central aspect which may have reinforced stigma, as will be discussed in the next section. The questions I asked were adapted throughout the fieldwork process (Berkowitz, 1997) having drawn upon reflections from each interview and in response to the individual dynamics of each interview.

5.3.3 Conceptual approach to investigating 'stigma'

My research aimed to examine stigma and the ways it manifests in women's everyday lives, social interactions and engagements with the benefits system. Based on my exploration of stigma in the current context and its gendered effects in the context of welfare reform for my literature review chapters, I was aware that stigma would likely be present in the accounts of the women I spoke to. I was also aware of the various interconnected levels on which stigma is said to operate (Scambler and Hopkins, 1986; Baumberg *et al.*, 2012; Patrick, 2017a), I therefore wanted to design my research in such a way that it would allow the complexities and nuances in experiences of stigma and resistance to be explored. However, informed by a feminist approach, I wanted to centre the experiences and voices of the women I spoke to, and be sensitive to their emotions throughout the research process (Stanley and Wise, 1983).

Previous empirical explorations into the area of poverty, class and stigma demonstrate the complexities of researching around sensitive and political topics where participants may express ambivalence, defensiveness or denial. Scholars have noted the increasing tendency for 'dis-identification' with a specific 'class' category both for middle-class and working-class people despite recognition of the wider 'politics of classification' (Savage *et al.*, 2010, p.117). Indeed, Shildrick *et al.* (2012) found, in their interviews with people on low incomes, that despite their circumstances officially situating them below the UK poverty line, there was a tendency for participants to avoid using terms like 'poor' and 'poverty' to describe their condition owing to their stigmatising connotations; terms like 'getting by' were preferred. Similarly, Hooper *et al.* (2007) avoided using the term 'poverty' in any publicity about their project, which investigated the experience of parenting on a low income, having anticipated that some participants would not wish to identify themselves in this way. Hence, I considered that stigma, by its very definition and association of shame, in the context of low socio-economic status, may be something that participants may avoid speaking about directly. As argued by Taylor-Gooby (1976, p.37) 'the admission of stigma is itself stigmatising'. This was

reflected by Peacock (2012, p.1) in her research exploring shame and stigma among women in Northern England; 'shame is a painful and difficult emotion that is likely to be denied or avoided and hard to speak of'. Such considerations affected my chosen method, the topics I planned to ask about, the order and style of questions and the follow-up questions I asked my participants, the language I used, and my approach to data analysis where I drew meanings from participants' responses. Previous examples showed the need to take a cautious and sensitive approach to studying stigma among females who claim social security benefits. Consequently, I endeavoured to take an open approach to the concept of stigma in my research and was careful not to assume my participants feel stigmatised nor impose pre-existing ideas on to them or reinforce the notion of stigma but instead gain an understanding of their subjective lived experiences, understand how they make sense of their identities and the attitudes of others towards them, from their perspective, and make their accounts central in the process of generating theory.

Within social research there are different conceptual traditions of thought in relation to how researchers approach the study of a concept (Blaikie, 2000). The 'operationalising tradition' can be seen as a top-down approach in that it requires researchers to identify key concepts, define them and develop means of measuring them prior to conducting any empirical research (Blaikie, 2000, p.132), whereas within the 'bottom-up' hermeneutic tradition concepts are developed based on the 'language of the social actors' being researched rather than the sociological language associated with the concept. Between these two polarising stances is the *sensitising* tradition (Blumer, 1969) which takes a more open and less definitive approach than the operational tradition in that while concepts are 'loosely defined' initially, they are refined by the researcher throughout the research process (Blaikie, 2000, p.138). Unlike the hermeneutic tradition, the researcher has ultimate ownership and authority over the decisions involved in defining the concept. Goffman (1963) claimed to have developed the concept of stigma by sensitising rather than operationalising the concept prior to his exposition of it. The sensitising approach appeals to me as it is flexible enough to allow the perceptions and narratives of the participants to shape the conceptualisation of stigma rather than have it rigidly pre-defined and pre-theorised but still allows for the ability to loosely define stigma initially, ask my participants questions which, while open, still align with this conceptualisation, and ultimately make decisions about the definition.

5.3.4 Sampling strategy, criteria and size

In qualitative research, the sample is not intended to directly represent or enable generalisability to 'the wider universe' but is often 'designed to encapsulate a *relevant range*' of 'experiences, characteristics, processes, interactions…cases or examples' (Mason, 2018, p.58, emphasis in original). As I wished to gain insight into the experiences and perspectives of women engaged with the benefits system a purposive sampling approach was used as this strategy entails the *strategic* selection of participants on the basis of their relevance to a particular research puzzle and theoretical position rather than being selected at random (Bryman, 2016; Mason, 2018). Participants were purposively sampled on the basis of identifying as female and relying on social security benefits for some or all of their income as well as being over 18 years of age. This set of broad criteria was deliberate in order to capture a range of women's experiences rather than those of a specific, already stigmatised, group such as lone parents or recipients of a particular benefit. Though I anticipated that some participants may have disabilities, this was again not an explicit part of my sample criteria, however it became an important theme as many of the women I spoke to had physical disabilities and mental health problems (details of the participant group are discussed in Section 5.4.4).

As highlighted by Mason (2018), purposive sampling also allows for flexibility throughout the data collection process so that selection criteria can be amended according to practical barriers, or to reflect changing research interests. This was reflected in my research experience. Indeed, my sample shifted in terms of the participant age group because, while I had initially planned to restrict the age of participants to women of working-age owing to stronger associations with stigma (Baumberg *et al.*, 2012), the opportunity to hear the experiences of a seventy-seven-year-old woman who began claiming Unemployment Benefit in the 1980s (and now claims Pension Credit) presented itself. The breadth between the youngest participant who was twenty-two and the seventy-seven year old added to the richness of the data and allowed an insight into the persistence of gendered stigma over time as well as an opportunity to compare recent experiences with those from decades past. My sample also shifted in that I had initially planned to interview women *currently* claiming benefits, but one of my participants had put in a claim for Universal Credit at the time of recruitment but by the time of the interview she had been offered work in her zero hours agency job. This indicated that my initial sampling criteria of 'currently claiming benefits' was rigid and did not encompass the possibility of this sort of scenario arising. Yet, it was a reflection of the transitory, recurrent experience of claiming

benefits in between periods of employment in today's neoliberal economy (Shildrick *et al.*, 2012). Again, this flexibility added to the richness of my data.

Rather than striving to gain an insight into the experiences of a large sample of participants with a view to being representative, qualitative methods seek to gain rich, detailed accounts of people's lives, hence the focus is not on quantity but quality of data (Mason, 2018). Consequently, I intended to interview between ten and twenty-five participants, and ended up interviewing sixteen women (details of the participant group will be discussed in Section 5.4.4).

5.4 The research process: Recruitment, data collection and analysis

5.4.1 Accessing my participant group

Although online recruitment via social media has been noted as a quick and simple means of recruiting participants and could widen the demographic scope and range of participants, this was inappropriate for my research because access to the internet continues to be patterned by socio-economic status (White and Selwyn, 2013). Gatekeepers, on the other hand, have been noted as a valuable means of accessing hard-to-reach, socially excluded individuals and groups and facilitating trust between the researcher and the participant, particularly in helping to overcome the 'outsider' status and 'social separation' of the researcher from the participants (Emmel *et al.*, 2007, s.2.2). Moreover, they help to provide a safeguarding barrier to ensure the research is appropriate for a potentially vulnerable group (Emmel *et al*., 2007). Owing to my critical stance to the social security system, going through the DWP to recruit participants was out of the question and instead I looked towards local charitable organisations.

I researched possible gatekeepers who work with women locally and came across a Merseyside-based, user-led community organisation which was initially created as a support network for local women. The charity provides support to local men, women and children from all backgrounds through a variety of courses and services tailored to the needs of different groups. In order to support women aged 18+, the service offers one-to-one listening support and signposting, therapeutic counselling, career coaching, confidence and self-esteem training, health and wellbeing activities, including aromatherapy and pamper days, art and craft activities, as well as trips and outings. To access such services women must complete a referral form or have this completed on their behalf.

The ethos of the organisation is *working with women, for women*, which aligns with my epistemological position of making women's voices central to the research. I therefore

considered this an excellent means of getting in touch with the demographic of women whose perspectives I was interested in exploring. I therefore contacted the organisation manager, explaining my interest in hearing about the experiences of women claiming social security benefits, and enquiring about the appropriateness of the organisation in facilitating this. The organiser explained that many of the women supported by the service are in receipt of benefits and have been adversely affected by recent welfare reforms and, as such, she believed there would be interest among the women in sharing their experiences with me. I visited the organisation to discuss my research and recruitment needs further and explained that the key concept I was interested in investigating was stigma but that I wanted to take a careful approach so as not to assume or reinforce stigma but, rather, to allow the women to discuss their everyday experiences, interactions and engagements with the system, which may, implicitly or explicitly denote stigma, or else refute stigma, or demonstrate a nuanced understanding.

It was important for me to give something back to my participants to express my gratitude for their contribution but, from speaking to the centre manager, it was decided that offering a financial reward for participating may pose issues for their benefit receipt and, owing to the financial hardship faced by many participants, may mean that participation would be driven by a financial incentive rather than being truly voluntary. Consequently, together, along with input from my supervisors, we decided that a 'thank you' event after data collection would be more appropriate.

5.4.2 Recruitment

My recruitment of participants came from a combination of me visiting the organisation and attending group activities, staff asking people who they believed may be interested, and women contacting me directly after seeing my research information poster at the organisation (see Appendix 6). Following my initial visit, I was invited to a pamper day that was arranged for the women who use the service. I secured funding from the University to pay for these treatments as a way of showing my appreciation. It was evident that the women enjoyed the day which inspired my decision to incorporate these 'pampering' activities into the thank you event which I planned for after the interviews to express my gratitude the women who shared their stories with me. The pamper day was an excellent opportunity to meet informally and talk to some prospective participants, overcome potential divisions and develop trust and rapport (Emmel *et al.*, 2007). It also served as an opportunity to gauge interest in taking part in my research as I discussed my project aims and what taking part would entail. As advised by the

organisation's deputy manager, I made it expressly clear that I was in no way affiliated with the DWP and that the research would have no influence whatsoever over their receipt of benefits as this fear could have presented a possible barrier.

Having anticipated difficulties recruiting from a supposedly 'hard-to-reach' group, I was struck by the eagerness of participants to share their experiences; every woman at this event who met the eligibility criteria wished to participate. This reflected an insight made by Shildrick and MacDonald (2013) in their research with people on low incomes where they found that the desire to share stories and experiences was far more prominent than has been previously assumed. Out of the nine women in attendance, seven expressed an interest in taking part and the remaining two were not eligible to claim benefits owing to their husbands' employment status and subsequent household income. The women who were keen to participate were varied in terms of age, circumstances and the types of benefits claimed, with a combination of mothers and women without children, and one woman claiming disability benefits.

Following the first wave of recruitment, I was invited to several group induction days with women who were new to the organisation which again were good opportunities to recruit new participants. The time I spent at the organisation helped me to develop a level of trust with the staff who then also acted as mediators and passed on my details to potential participants. I created a poster (see Appendix 6) which informed prospective participants about the main aspects of my research in an accessible way along with my contact details. A couple of participants got in touch with me this way as a result and I reiterated key details about the research and sent them copies of the participant information sheet via email, making it clear they were welcome to contact me via phone or email to ask any questions prior to being interviewed.

Despite the generally positive responses to my research, I did experience some setbacks in recruitment. The timing of my recruitment was made difficult by the school summer holidays when a lot of female service users were occupied with childcare and recruitment slowed during this period. Moreover, a couple of potential interview opportunities fell through. Most notably, one of the staff members at the organisation told me about a mother they had visited who claimed Universal Credit, who was struggling financially and had expressed interest in being interviewed. However, they informed me that she would have difficulty travelling to the organisation because she lived in quite an isolated estate without many transport links. I

therefore tried to arrange a suitable research location very near her address and managed to secure a private room in a local school to conduct the interview; however, she later changed her mind and did not get back in contact. This experience was a reminder that while my research was able to explore the experiences of a group of women whose voices would otherwise remain unknown, they were still able to access the service and there may be many more socially excluded people that my research was not able to reach.

5.4.3 Gaining informed consent

Gaining full informed consent from each of my participants was an essential ethical procedure for my research. I was aware that my existing contact with the gatekeeper organisation, and their expression of interest in working with me, did not in any way negate the need to seek informed consent directly from each of the individuals involved (British Sociological Association, 2017). This consent was 'freely given' - the gatekeeper and participants were assured of the entirely voluntary nature of participation and were not made to feel pressured to take part in any way (British Sociological Association, 2017, p.5). Moreover, I was mindful that consent could only be given to participants who are *fully* informed about the nature of the research, what was required of them and the potential harms of participating in the research. I therefore ensured that the participant information sheet (see Appendix 5) gave an accessible, comprehensive understanding of the research and what taking part would entail.

The participant information sheet included details about the purpose of the study, the recruitment criteria, assurance about the voluntary nature of participation and the right to withdraw at any time. It also discussed the nature of the interview, with details about the sorts of questions I would ask, while emphasising that the discussion would be largely centred around what they *choose* to share with me, assuring them of their right to or refuse to answer any question without giving a reason, or stop or pause the interview at any time. Additionally, it provided information about the benefits and potential risks of taking part, and how such harms would be mitigated, as well as information about the recording of the interview, the use and storage of data, and the ways their privacy and anonymity would be protected.

For interested participants, I gave them a copy of the information sheet either in person or via email, depending on how they were recruited, and I invited them to ask any questions about what would be involved prior to confirming and arranging a suitable interview time and date. I ensured participants had a couple of days to read the information and contact me prior to the

interview and I went through the sheet with them in person at the beginning of each interview, again inviting any questions, before they signed the consent form (see Appendix 7). This ensured that participation in the research was based on full disclosure about what it would entail. The voluntary nature of the research was emphasised throughout including in the de-briefing sheet given after each interview.

5.4.4 The participant group

My participants were a group of sixteen women currently or intermittently claiming a range of means-tested and non-means-tested benefits. The women were diverse in terms of age, motherhood status, disability status and circumstances, benefit claiming category, trajectory and duration. The youngest participant was twenty-two and the eldest was seventy-seven. Ten were mothers. This variation was intentional as I wished to capture the experiences and the dynamics of stigma for a range of women and therefore I did not employ overly selective recruitment criteria. The group's homogeneity in terms of ethnicity, however, was unintended, but perhaps reflective of the demographics of the local authority area, with a White British population of over 94% (ONS, 2017).

5.4.5 Conducting the interviews

The interviews were conducted between July 2019 and February 2020. They took place in a private room the gatekeeping organisation where counselling sessions normally take place. This was a convenient, safe, comfortable and informal environment which the participants were likely to be familiar with. I believed that their likely familiarity with the setting may help to ease the potential power imbalance (see Section 5.5.4 for a more in-depth discussion of power dynamics). I envisaged that the interviews would last around an hour each, and most interviews lasted around this time, but one was shorter at forty-five minutes because the participant had caring responsibilities to attend to, and the longest lasted two hours. The length of interviews was dictated largely by the participant and the dynamics of each interview. Interviews were audio-recorded using a dictaphone.

Prior to each interview, I met the participant at the organisation and in most cases we spoke informally before the interview began which helped us to get comfortable and develop rapport. I began the interview by briefly introducing myself, including information about living locally and about the project and why I would like to hear their perspective. In line with feminist research ethics (Oakley, 1981), I felt that sharing some personal details about myself was only

fair considering I was asking them to share details about their lives with me. After this brief introduction, I asked an open question (‘would you like to tell me a little bit about yourself?) to help ease the participants into the interview situation and to help get to know about them and their lives, allowing them to choose what to share with me (Kvale, 1996). Despite benefits and the benefits system being a key focus, I did not want this to be the sole defining focus of our interaction as I wanted to situate their benefit claiming experiences within the broader context of their lives, their family and living circumstances, their health and their values and interests. As discussed in section 5.3.3 I also believed that doing so may risk reinforcing stigma and seeing benefit claiming as a defining feature of their identity.

The interviews required a careful negotiation between listening closely and responding appropriately to the women who were sharing their experiences with me while also retaining a sense of the interview as whole (King and Horrocks, 2010). I used my topic guide (see Appendix 4) but not in an overly prescriptive way; instead, some of the core themes were kept in my head but I allowed the conversation to flow organically, with verbal and non-verbal affirmations that I was listening closely, and used probing and follow-up questions to enable further meaning and richness to develop from their accounts (Kvale, 1996). In line with my feminist approach, it was important not to steer the interviews but to allow the women freedom to express what was important to them and, as such, conversations deviated from the anticipated discussion topics in unique ways for each participant. However, skill was required to ensure that there was adequate focus on the issues I wanted to cover (King and Horrocks, 2010). Inevitably, some participants were shyer and more withheld than others, which required skill to ask gentle, probing questions and to encourage more elaborate responses (Kvale, 1996; King and Horrocks, 2010). This said, some shyness appeared to dissipate as the interview progressed and they became more comfortable and open. In some instances, some very interesting data emerged as the interview was drawing to a close.

During three of the interviews, the participants cried when disclosing difficult experiences. When this happened, they were given as much time as they needed and were made aware of the option to stop the interview but in all cases they continued in their own time. During one interview, however, I quite unexpectedly became emotional when a participant told me a very touching story about her son buying her a car as a gift, which she did not believe she deserved, and she recounted how her son reminded her of the sacrifices she made for him when he was growing up. Given the struggles she had described throughout the interview, the story made

me feel emotional enough for the participant to notice. She light-heartedly told me to stop crying, and we both laughed. This instance illustrates, in practice, the principles of feminist research discussed in section 5.2, where rather than feigning the role of a detached and neutral observer (Haraway, 1988) I became emotionally involved in the research and knowledge production process. An interesting dynamic emerged with the same participant in that throughout a lot of the interview she qualified and justified her decisions to me, and her possession of what she called "luxuries" (such as owning her car - which she later disclosed was a gift - and having a television package). From this, it seemed that she was anticipating feeling stigmatised and judged. Towards the end of the interview, when it was drawing to a close, I thanked her for sharing her story with me and then her defensive response was explained; she had been worrying that I was going to ask her intrusive questions about her financial incomings and outgoings but she was relieved and felt better after speaking to me. I assured her that I was not there to intrude, judge her or check up on her, and she laughed and explained that even though she had read the information sheet and read about what the interview would entail, she still worried, based on her past experiences with benefits officials over the past four decades, that I might ask intrusive questions that she would be uncomfortable answering.

Each participant was given a debriefing sheet after their interview which I talked through with them (see Appendix 8). This summarised the research, thanked them again for their time, reiterated the contact details of the supervisory team and included sources of support. I also took time to reflect on the interview dynamics and initial emergent themes and then completed my reflexive log while the details were fresh in my mind. I also shared such insights with my supervisors.

5.4.6 Data transcription and analysis

Owing to the feminist approach underpinning my research and the value placed on researcher reflexivity, I wished to remain 'close' to my data in the process of transcription and analysis and this informed my decision not to use software for these processes. Similarly, paying to have my interviews transcribed would have also compromised the ethics of my research and my closeness to the data. Consequently, transcription and data analysis were more time consuming than if I had used specialist software or transcription services to help me.

The interviews were transcribed verbatim, using pseudonyms and changing any details that could identify the participants (privacy and anonymity will be discussed more fully in section 5.5.2). This took several months during and after the fieldwork stage of my research. The transcription process entailed listening carefully and closely to the audio recordings of my interviews thus becoming re-immersed in my data. I wanted my transcription to be a very accurate portrayal of my conversations with the women so I paid attention to utterances, pauses, hesitations and emphasis, in addition to laughter and moments when the tone or emotion changed (Roulston, 2014, p.299). This close attention to my data reflected my feminist ethos of centring the women's voices in my research (Spender, 1980) through listening closely and sensitively to the complexities and nuances within the women's narratives.

Transcription began as soon as possible after each interview so that my memory of the interview was fresh in my mind, but each transcript took several weeks to complete owing to my other commitments at the time, along with the sometimes upsetting nature of the discussions being transcribed. Indeed, many participants discussed very emotional, difficult experiences such as financial hardship, bereavement, abuse, addiction and deteriorating health, coupled with deep injustices suffered at the hands of the state. This necessitated breaks from listening to and transcribing upsetting material. This is discussed further in Section 5.5.3 on the ethical considerations taken to avoid harm in the research process.

My data analysis process began during each interview and in my immediate reflections noted in my reflexive research log, which I shared with my supervisory team. The analysis continued through the transcription process, as this involved repeated listening to the data very closely and carefully and becoming absorbed in it, noticing important aspects of the conversation which may have gone unnoticed during the interview itself. During this familiarisation process (Braun and Clarke, 2006), I paid close attention to the language, emotions, meanings and overall experiences, and noted down the themes I felt were central. I then began the more formal and systematic process of analysing each interview thematically, before later beginning to compare across interviews.

In my initial thematic analysis, I identified and noted surface-level sub-themes or codes emerging explicitly within each interview (Braun and Clarke, 2006). However, I wanted to go beyond this surface-level and situate such themes or 'small chunks of meaning' (Maguire and Delahunt, 2017, p.3355) within the unique context of each participant's life. I wished to capture

the richness of the women's accounts and stories, selecting choice quotes which captured the essence of their experiences, while also contextualising such quotes within the broader picture of their lives and circumstances so that they were not stand-alone snippets but understood as part of a more holistic picture. Owing to the richness and detail of the interviews, there was a lot of information for each participant, for instance about their past experiences, benefit claiming trajectory, caring responsibilities, health, family and community connections and living circumstances. I used an Excel spreadsheet to manage the breadth of my data and store key details about each participant and their experiences; I wanted to make sense of each of their biographies and benefit claiming stories so that I could situate their accounts within such trajectories.

Once I had gathered the sub-themes and 'surface meanings' from the data, I began to identify and fit these into larger and more overarching themes, which were sometimes more hidden (Braun and Clarke, 2006), taking care to avoid the pitfall of merely choosing themes which corresponded with my interview questions (Clarke and Braun, 2013). This process was not linear but *iterative*, meaning that I continually revisited my data in a reflexive, critical fashion, in order to create new conceptual connections and thus deepen my analysis (Berkowitz, 1997; Srivastava and Hopwood, 2009). I utilised hand-drawn spider diagrams and mind maps to help me make the connection between sub-themes into larger themes. As I gathered more data throughout the fieldwork process, I noted repetitions and typical patterns across the data as well as areas of contrast (Berkowitz, 1997). While the variation in participant circumstances and experiences was a benefit in terms of the richness of data and the ability to shed light on the pertinence of stigma in the lives of a varied group of women it also presented a challenge as I did not wish to gloss over or treat the participant group as homogenous and wanted to respect and give attention to their differences as well as their shared insights. During the analysis phase of the research, I also had the opportunity to write a peer-reviewed journal article about some of my thesis findings (see Appendix 9); the process of writing and responding to reviewer comments helped me to refine some of my ideas. Planning, structuring, writing up and redrafting my findings chapters therefore required a continually reflexive and critical approach.

5.5 The importance of ethical considerations and researcher reflexivity

Finally, ethical considerations and researcher reflexivity will be discussed. This emphasises the continual need for myself as a researcher to critically reflect on my role in the research process and the co-construction of knowledge in the interview process. Prior to speaking with or

recruiting participants, ethical approval was sought from and granted by the University of Liverpool's research ethics committee (see ethical approval letter in Appendix 3). I was aware of the need to adhere to the core principles of ethical research throughout the *whole* research process, from access and recruitment to data collection, storage, analysis and beyond. According to the British Sociological Association (2017), the main ethical principles for sociological research are ensuring fully informed consent is gained (see section 5.43), protecting the participants' privacy and avoiding harm, both to myself and my participants, so these ethical considerations will now be discussed in more detail.

5.5.2 Privacy and anonymity

Protecting the privacy of my participants remained a crucial ethical priority throughout the research process (British Sociological Association, 2017) Hence, pseudonyms were used immediately for each participant when transcribing interviews to protect their identity and keep them fully anonymised. Moreover, this attention to privacy also included anonymising place names and other key details such as the names of family members so that they are non-identifiable. As such, I chose to leave the specific location and name of the organisation anonymous.

Furthermore, the recordings were saved on to a password protected device, which was then transferred onto the M Drive of the University of Liverpool network on the day of each interview. The original recording was then destroyed. The data will be stored securely for the duration of PhD registration, after which time it will be deleted. Any remaining paper copies of transcripts will be shredded and disposed of.

5.5.3 Avoiding harm

Despite gaining fully informed consent, I was aware that doing this does not absolve researchers of the responsibility for mitigating against potential harm to the participant as a result of participating in the research (British Sociological Association, 2017). I was aware that the study participants may be deemed vulnerable owing to the likelihood of economic insecurity and social exclusion that may be associated with being in receipt of benefits, particularly in the context of ongoing welfare reform, and due to the fact that they were accessing a women's support service. Consequently, the need to anticipate and protect against potential harm was especially important (Robson, 2011). I knew that the interviews would involve discussing their lives, past and present, which I knew may include recounting difficult

experiences and emotions; this presented the potential ethical risk of triggering psychological trauma and distress.

I mitigated against this in the design of the research, and the interview topic guide, by ensuring that the questions I asked were very open-ended, so that participants could choose which personal narratives they wished to share. I also reminded participants that they could decline to answer a question and withdraw from the research at any point without reason. As mentioned in section 5.4.5, when participants did become upset during the interview, I dealt with this sensitively, never pressing them to continue but allowing them time and space to process their emotions and decide whether and when to resume the conversation. Here I followed the ethical imperative of prioritising the rights of the participants over the pursuit of knowledge (British Sociological Association, 2017).

Given the sensitive and difficult issues raised, I also tried to ensure each interview ended on a hopeful and positive note where appropriate; I asked about how they would change the benefits system, what their perfect day would be, and about their hopes for the future. At the end of the interview, I sincerely thanked each participant for their time and also asked them about how they had found the interview experience. The participants expressed a positive view of the interview, with several participants thanking me for listening to them. As Lucy, a disabled single mother, explained:

> *It's nice for somebody to acknowledge, you know, that I might be quite interesting [laughing]. It sounds silly doesn't it, but when you're on the flip side of the coin, something like that's massively important, you know, because your self-esteem hits the floor, you know, your self-worth. So it's… it's quite nice just to be here. Thank you!*

This was very touching and indicated that the interview experience had not caused the women emotional harm but had actually been a cathartic and validating experience.

Moreover, the de-briefing sheet I gave to the participants afterwards (see Appendix 8) included sources of support, which were formulated with the possible needs of the participants in mind and through discussion with the manager of the gatekeeping organisation. I went through this with the participants and I also gave them a card to say thank you for their time and their important contribution to the research project. This was important for establishing some degree

of reciprocity and helping to mitigate against the possible power imbalance between myself and the participants.

In addition to anticipating and avoiding harm to participants, I was conscious of the need to protect against harm to myself. Owing to the sensitive nature of the research and the possibility that upsetting themes may be discussed, I knew that I, as a researcher, may encounter psychological distress and negative emotional effects as a result. I strived to minimise such risks by ensuring to leave adequate time in between each interview, writing down thoughts and feelings in a reflexive log and maintaining continual contact with my supervisors throughout the fieldwork and analysis process. I was also aware of counselling services and the importance of self-care. Nonetheless, I had not envisaged how emotionally draining the process of listening back to and transcribing the interviews would be. As discussed in section 5.4.6, the emotionally heavy nature of much of the data meant that I sometimes had to take breaks from transcribing to protect myself from emotional harm.

5.5.4 Power, positionality and reflexivity

Power differentials within research between the researcher and participants have been noted as ethically and methodologically problematic. These differences can be based on sex, age, 'race', class and other social divisions (Stanley and Wise, 1983). As discussed in section 5.2, feminist research seeks to reduce such unequal power relations by striving to achieve symmetry in the social identities of the researcher and participant. Like my participants, I am also a woman, which may have in some ways helped to overcome any potential barriers between us and helped develop trust and rapport during recruitment and the interview itself (Stanley and Wise, 1983). Nonetheless, I did not take our similarity here to imply a natural, taken-for-granted bond of trust and equal power status based on shared sisterhood, and I knew I needed to continually critically interrogate the research process. As argued by Haraway (1988, p.584) 'to see from below is neither easily learned nor unproblematic, even if "we" "naturally" inhabit the great underground terrain of subjugated knowledges. The positionings of the subjugated are not exempt from critical reexamination, decoding, deconstruction and interpretation'. In addition to a shared gender, my participants and I also had ethnicity in common; like myself, all of my participants were white British. I retained an awareness that these similarities would not in themselves tackle the issue of unequal power between me and my participants because my position as a researcher meant that I had more control over the process of data collection and

interpretation (Standing, 1998). This awareness influenced every stage of the research process causing me to continually reflect on and try to mitigate against potential power imbalances.

Moreover, despite sharing gender and ethnicity demographic characteristics in common, I retained a continual awareness of the likely differences between our lived experiences and social class background, which I knew could create a barrier between us. I am from a middle-class background and have not experienced class prejudice. I also have not experienced financial hardship in the same way that they were likely to have done. Moreover, I do not suffer with chronic or severe mental health problems and have the privilege of good physical health. I was continually conscious of such differences, therefore, while I listened carefully and empathised with their stories, I did not claim to know exactly what those experiences felt like. I had claimed benefits for several months after finishing my Undergraduate degree and had my claim stopped due to missing an appointment and, where this came up in conversation, I did not withhold this information but I was also aware that my limited experience with the benefits system differed to most of theirs in that I was living with my family and had financial backup if needed, a privilege not shared by my participants in their experiences with a punitive and difficult to navigate social security system. Therefore, I did not wish to use this experience to overemphasise what we shared in common as I considered that this would be insensitive and tactless.

However, despite such differences and potential power imbalances, as advocated by feminist perspectives, my research endeavoured to place upmost emphasis on the rights, voices and narratives of the women I spoke to, privileging their unique perspectives and lived experiences as crucial sources of knowledge (Haraway, 1988). This entailed being continually aware of the risk of imposing pre-conceived ideas onto the participants as well as remaining reflexive and critical about my own role in the co-construction of knowledge. This included attempts to recognise and mitigate against power imbalances in the planning of the research, during the interviews themselves, and in my data analysis. The decision to use a community-led gatekeeper organisation where the women accessed support was one way I hoped that the participants would feel comfortable in the research process. As emphasised by Emmel *et al.* (2007), trust was an important aspect of this. Spending time at the organisation helped me develop trust and rapport, which I hoped would help overcome the potential division between me and the women who I would be interviewing. Trust was also established during the interviews and was maintained even *after* the data was collected through an element of

‘reciprocity’ (Emmel *et al.*, 2007, s.2.5), which is valued within feminist research (Oakley, 1981; Standing 1998; Goode, 2000).

During the interview, for example, I shared details about myself and sometimes the participants asked me questions, for instance about being a student, and I answered such questions candidly and honestly, in the same way that they were being candid and honest with me about their lives. This reflects Oakley’s (1981) experiences of feminist interviewing, where openness and willingness to answer questions helped to create a non-hierarchical interview. Moreover, trust was also maintained by me ensuring the questions I asked during the interview were open, encouraging them to share the stories and perspectives that *they* found important, rather than imposing my own agenda or pre-conceived assumptions. After the interview, the reciprocity, respect and trust that characterised the researcher-participant relationship was maintained in several important ways. The de-briefing sheet, thanking participants for their time and offering sources of support, and the thank you card I gave them, were ways of supporting my participants and showing gratitude. Additionally, I gave one participant a lift home and communicated with another to give details on how she could seek advice about an issue that was raised during the interview. These small acts are similar to those described by Goode (2000). I also kept in touch with the women I interviewed with updates about the project. The thank you event I planned to organise unfortunately has not yet (at the time of writing) been able to happen owing to the restrictions in place in light of the COVID-19 pandemic, but this will be arranged as soon as it is safe and practical to do so. In this event I plan to thank all of the women for taking part, discuss key findings and implications of the research, and express my gratitude through paying for pampering activities like those at the group activity day I attended at the beginning of recruitment.

5.6 Conclusion

Overall, this chapter has outlined the methodological approach adopted to explore the role of stigma and resistance in the lives of women engaged with the social security system. The chapter began with a discussion of the philosophical assumptions and approach underpinning every aspect of the research, from its design through to data collection and analysis. This discussion was centred around feminist epistemologies and their challenge to conventional, hitherto male-centric research paradigms. This section of the chapter demonstrated the ways that feminist researchers since the 1970s have exposed and critiqued the inherent politics of knowledge production which were hitherto unseen and have reformulated and continue to

explore notions of *who* can be knowers, what counts as legitimate knowledge about the social world, and what methods of knowledge production can be utilised.

In critiquing the exclusion and misrepresentation of women as both researchers and research subjects, and the supposed objectivity and impartiality of traditional male-centric sociological theory, namely positivism, feminist researchers have instead drawn attention to the 'situated' and subjective nature of social knowledge, and how knowledge production 'from below' (Haraway, 1988, p.584) can offer a privileged vantage point (Oakley, 1974; Harding, 1987a; 1991; Haraway, 1988; Smith, 1991). As demonstrated, far from producing a single unitary theory and method, this opened up an ongoing debate about the distinctiveness of feminist research and about women's position in relation to theories of knowledge (Doucet and Mauthner, 2007). Such debates and discussions have been central in informing my feminist research with women in relation to stigma, from the research design, the fieldwork process, analysis and ethical considerations.

Following a discussion of the underpinning feminist philosophy, the chapter outlined and justified the research design and methodological decisions, reflected on the research process, from recruitment to data analysis. Finally, ethical considerations were outlined, with an emphasis on the need to be reflexive and critical of my own positionality within the research, throughout the whole process. The next two chapters will present the findings from my research.

Chapter 6: Institutional stigma in an era of unprecedented welfare reform: mechanisms, experiences and effects

6.1 Introduction

As explored in the second chapter of this thesis, theorising stigma in a 'distinctly political register' (Tyler, 2020, p.8) as a multidimensional form of power enables a critical understanding of the mechanisms and sites through which stigma is intentionally crafted and reproduced. Using this theoretical lens, the next two chapters contribute to knowledge about the operation and function of the classed and gendered stigma attached to poverty and benefits receipt in the contemporary context. They do so by drawing on the experiences and perspectives of the participants of this study, women engaged with the benefits system. Such perspectives further exemplify the power and pervasiveness of state-crafted stigma operating on both an institutional level in the social security system, as well as in everyday social interactions and self-perceptions. Though these mechanisms of stigma are very much interlinked, for clarity, they will each be addressed in turn over two chapters, with this chapter focusing on institutional stigma and the next chapter exploring everyday manifestations and responses.

This chapter illuminates the mechanisms of institutional stigma at play in the contemporary benefits system using Tyler's (2020) framework of stigma theory to contribute to existing knowledge. Institutional stigma is understood as stigma occurring in the process of claiming benefits due to its embeddedness in the design and implementation of the social security system (Pinker, 1970, 1971; Spicker, 1984; Baumberg *et al.*, 2012). As illustrated in chapter three, stigma has remained a longstanding feature throughout the history of the British social security system, deliberately cultivated to ration welfare expenditure and govern those who seek support (Golding and Middleton 1982; Spicker, 1984; Page, 1984; Walker, 2014; Tyler, 2020). However, its mechanisms and manifestations have shifted over time and take a distinctive form in the current context of neoliberal austerity, warranting continued scrutiny of the central role of stigma in shaping claimants' engagements with the social security system.

The unprecedented austerity-driven reform of the social security system over the last decade has entailed successive cuts to provision and the amplification and extension of welfare conditionality and the sanctioning of groups previously exempt, such as disabled people, lone parents and the under-employed (Dwyer and Wright, 2014; National Audit Office, 2016;

Grover, 2019; Ryan, 2019). Such processes of welfare reform and changes to benefit entitlement can be understood in terms of the extension and amplification of the institutional stigma already embedded in the benefits system historically, 'adding another layer' to the stigma of the benefit claiming process (Patrick, 2017a, p.154-155). Existing research has illuminated the central role that stigma plays in legitimating and garnering public consent for such reforms (*inter alia* Jensen and Tyler, 2015; Shildrick, 2018; Tyler, 2020), as well as acknowledging the tendency of such reforms to reinforce degradation and stigma (Patrick, 2017a). This is an important area for further study which builds on and contributes to this body of knowledge.

This research therefore further explores the mechanisms of institutional stigma in the current context using the framework of contemporary stigma theory as its theoretical lens. It does so by examining how institutional stigma operates and manifests in the lives of the participants of this study. The participant group comprises of sixteen women, all of whom have been affected by welfare reform. As will be detailed in the next section, many of the participants are disabled or suffer with health impairments, and/or diagnosed mental health conditions, and most of the participants are mothers. The research therefore contributes to understandings of how institutional stigma intersects with gender and disability in the current context of unprecedented welfare reform, which is both legitimated by stigma and disproportionately affects women and disabled people. Tyler's (2020) reconceptualisation of stigma provides a fruitful theoretical lens for critically examining the mechanisms through which current social security policies are framed and enacted, seeing stigma as deliberately cultivated by powerful groups to retain and further accumulate political and economic power, and thus reproduce unequal social relations (Link and Phelan, 2001; Scambler, 2009; Tyler, 2020). This framework also enables an understanding of how different forms of stigma intersect so is also utilised in the second findings chapter on stigma and everyday life.

This chapter, firstly, introduces the participants of this study with an overview of their demographics, before presenting the participants' journeys in relation to claiming benefits, grouped according to the type of benefit they currently claim. This section illuminates the variation in experiences and trajectories within the participant group, while also showing shared aspects such as the impact of ill health and caring responsibilities, the imposition of conditionality and medical assessments to prove eligibility, the denial of deservingness and withdrawal of welfare support, the role of the benefits system in reinforcing economic

dependence on partners and the difficulty of finding, suitable secure employment. The tables in this section will provide a context and reference point for the findings that follow.

The chapter then presents the research findings on the institutional stigma that permeates the benefits system, from its framing and design, to its implementation and wider impacts. Firstly, the framing and design of the system will be discussed, including the intentional deterrent aspect of the benefits system and how this affected women's decisions to claim despite being eligible and in need of support, the lengthy processes involved in applying for support, the transition towards a digital-by-default benefits system, and how aspects of the system design risk reinforcing women's financial dependence. Following this, the chapter then discusses the mechanisms of stigma at play in the implementation and delivery of the benefits system, including Jobcentre staff advisor attitudes and use of discretion, the Jobcentre environment, and the forms of conditionality and sanctioning imposed on various claimant groups and their effects. Throughout the chapter, attention will be given to comparing and contrasting experiences of institutional stigma for different claimant groups, highlighting areas of continuity and aspects that are unique to particular groups.

6.2 Research participants: demographics and benefit trajectories

To supplement this section, a detailed description of each participant's circumstances and benefit claiming can be found in Appendix 1.

6.2.1 Overview of participants

	Pseudonym	Age	Ethnicity	Current Benefit	Household composition
A: Unemployed/ economically inactive (& not applied for/ receiving disability benefits)	Jasmine	22	White British	Universal Credit	Living alone
	Dawn	36	White British	Universal Credit (& disability benefits for step-son)	Single parent household (4 children)
	Norma	77	White British	Pension Credit	Living with partner/spouse
B: Unsuccessful/ pending application for disability benefits (+/- other benefits)	Amy	23	White British	Universal Credit	Living with parent(s)
	Natalie	31	White British	Job Seeker's Allowance	Coupled parent household (4 children)
	Michelle	48	White British	Universal Credit	Single parent household (1 child)
	Lorraine	44	White British	Universal Credit	Coupled parent household (2 children)
C: Currently receiving disability benefits	Joanne	35	White British	Employment Support Allowance & Personal Independence Payment	Living with parent(s)
	Christine	58	White British	Employment Support Allowance & Personal Independence Payment	Living alone
	Donna	36	White British	Employment Support Allowance (& Disability Living Allowance for son)	Single parent household (3 children)
	Sue	53	White British	Employment Support Allowance & Personal Independence Payment	Living with partner/spouse
	Lucy	44	White British	Employment Support Allowance & Personal Independence Payment	Single parent household (1 child)
D: In paid employment	Zoe	38	White British	Universal Credit	Living alone
	Tracy	41	White British	Disability Living Allowance for disabled son & Carer's Allowance	Coupled parent household (1 child)
	Kerry	51	White British	Not currently claiming benefits	Living alone
	Alison	50	White British	Universal Credit	Coupled parent household (2 children)

The sixteen women I interviewed were diverse in terms of age, the type of benefit they claimed and their household composition. This variation was intentional as I wished to capture the experiences and the dynamics of stigma for a range of women and therefore did not employ selective recruitment criteria. The group's homogeneity in terms of ethnicity, however, was unintended, but perhaps reflective of the demographics of the local authority area (ONS, 2017).

The participants fell into four groups according to their current benefit claiming status. These groupings were unplanned and were devised following data collection to help to categorise and make sense of such varied experiences and benefit trajectories.

Group A comprised of women who are unemployed or economically inactive and are not claiming or awaiting a decision regarding disability benefits.

Group B consisted of women who have attended medical assessments to determine their eligibility for disability benefits and have either been unsuccessful or are awaiting a decision. People in this group are reliant on other benefits in addition to the unsuccessful or pending disability benefit claim.

Group C included those who are currently receiving disability benefits. Women in this group may have had unsuccessful applications for disability benefits in the past but their disability benefit claiming status is currently stable.

Finally, the women in **Group D** were in paid employment, with one in a phased return to work after absence due to ill health, two working part-time and one working full-time and not currently reliant on benefits. As will be shown in the following trajectories, there are women in other groups who engage in voluntary work, and there are women who have been in paid employment previously.

It is worth noting that there are overlaps between the groups. One participant, Donna, was difficult to place as she fitted into Group B in the sense that she was awaiting a decision regarding her re-application for Personal Independence Payment (PIP), however she was grouped into C because her claim for Employment and Support Allowance (ESA) is currently stable and comprises the bulk of her income.

Moreover, several women outside of Groups B and C who have not applied for or are not currently receiving disability benefits do suffer with chronic mental or physical health

problems that are not formally recognised by the benefits system, as they do not believe it is worth their time and energy applying for disability benefits. For example, as will be discussed in section 6.3.1, Jasmine (22, UC) was deterred from trying to claim benefits on the basis of her health problems, despite being diagnosed with a hormonal condition, abdominal issues causing severe pain and problems with weight management and anxiety and depression, because she did not believe the DWP would deem her issues severe enough to make her unfit for work, despite them presenting barriers to the types of jobs that she could feasibly accept.

Within each group, the benefit claimed varies owing to factors such as how recently they put in their claim for benefits, the staggered rollout of Universal Credit in different localities and for different benefit claiming categories, their household composition, whether they have a child with a disability, their employment status, and their age, in the case of one participant in Group A, Norma, who receives Pension Credit due to being of pensionable age. The next section details the trajectories of the women in each of the four groups detailed above, adding more colour and context and demonstrating the complexity and variation in the participants' experiences and circumstances shaping their engagement with the benefits system.

6.2.2 Participant benefit trajectories

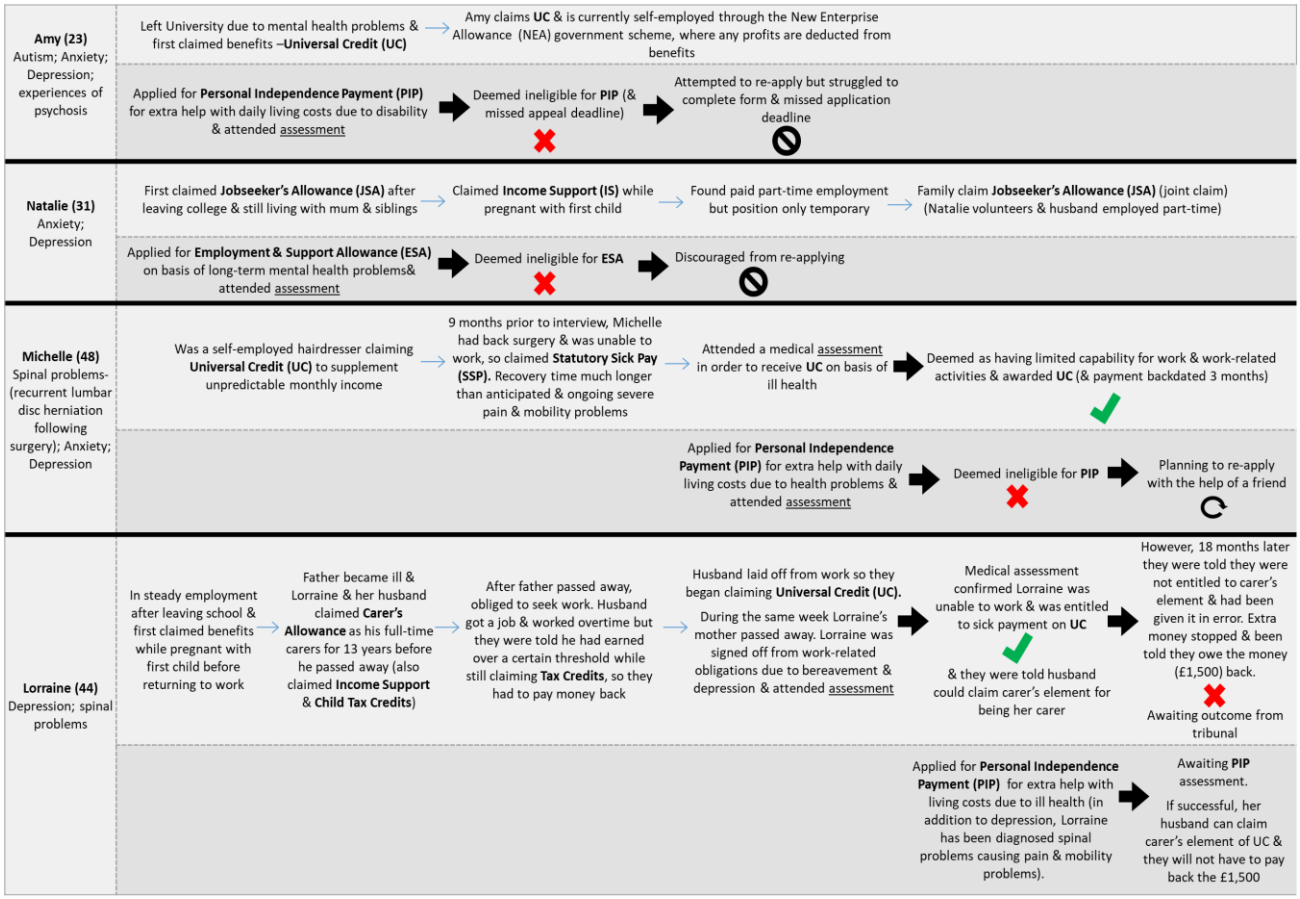
The following tables show the benefit trajectories of the women in each category outlined above, based on what they chose to share with me in the interview.

While tables *A* and *D* are formatted straightforwardly, B and C are more complex owing in-part to the reform of disability benefits in recent years decades and the fact that sick and disabled people may claim multiple benefits at once. Some participants therefore have two rows because they claim several benefits concurrently.

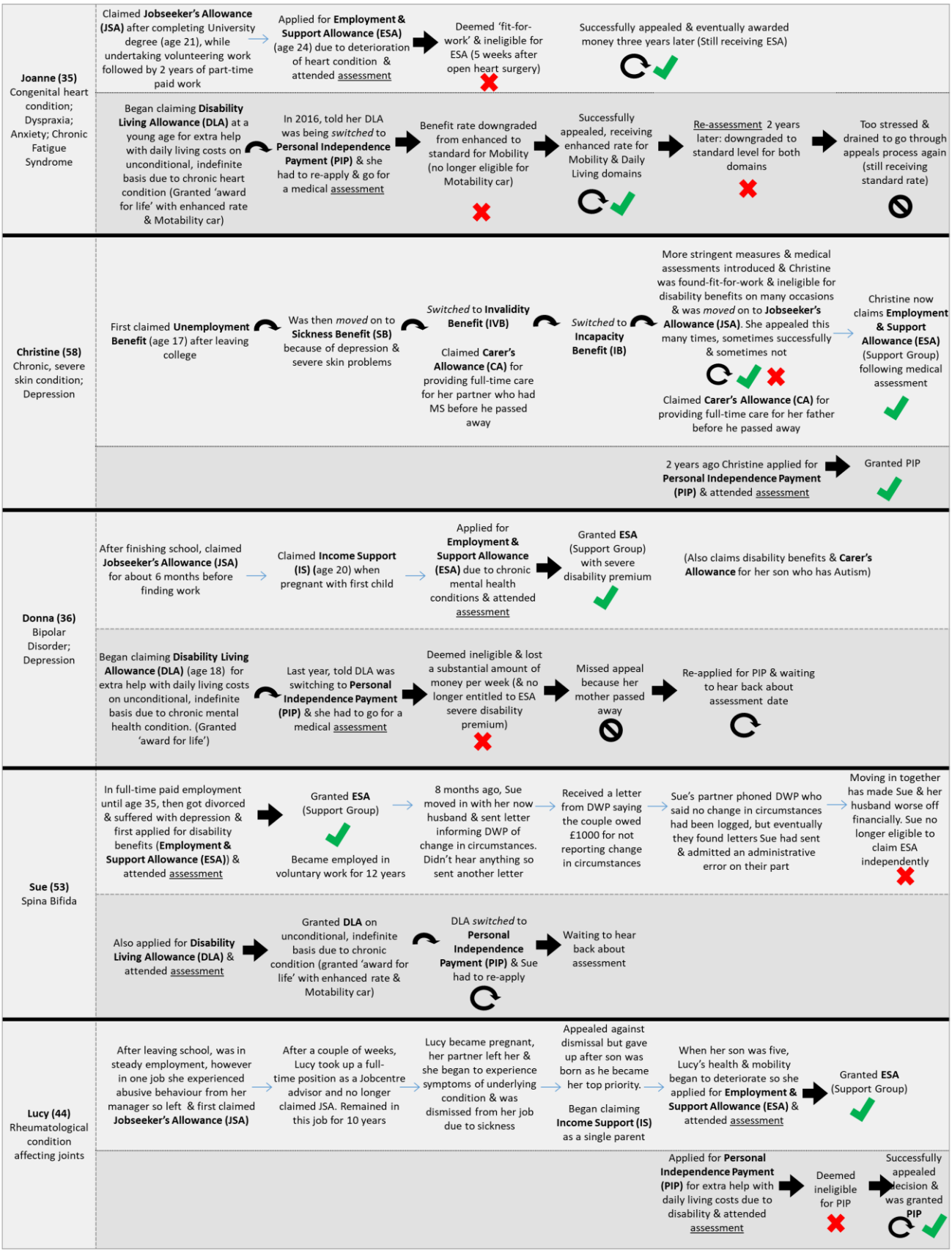
A. Unemployed or economically inactive (and not applied for/receiving disability benefits)

Jasmine (22)	First claimed **Income Support (IS)** (age 15) while living independently due to turbulent home circumstances →	Claimed **Jobseeker's Allowance (JSA)** between periods of paid employment →	Applied for & now claims **Universal Credit (UC)** while actively seeking suitable work since moving to a new area a year ago			
Dawn (36)	First claimed **Jobseeker's Allowance (JSA)** (joint claim) (age 18) as a new mother when partner became unemployed →	Moved off JSA when partner found employment, but began claiming **Income Support (IS)** as a single parent following relationship breakdown →	Found employment & moved off IS. Met new partner & stopped working while pregnant & financially reliant on partner. However, he was made redundant so couple claimed **JSA** (joint claim) →	Partner became self-employed so family stopped claiming JSA (claimed **Tax Credits** & **Housing Benefit**) →	Relationship ended & Dawn informed the DWP of her change in circumstances, however she was later told she had been overpaid & owed £300 back & had money deducted. Dawn & her children were temporarily homeless & staying with family for several months before obtaining occupation order →	Dawn applied for & now claims **Universal Credit (UC)** as a single parent (& disability benefits for her disabled step-son). She also applies for **Discretionary Housing Payment (DHP)** to help with rent costs
Norma (77)	Stay-at-home mother with three children when husband made redundant in 1980. Family began claiming **Unemployment Benefit** →	Gained part-time paid employment (max. 16 hours) for several years after children moved out, followed by 16 years of voluntary work, while claiming **Jobseeker's Allowance (JSA)** (joint claim) →	Claims **Pension Credit (PC)** (joint claim)			

B. Unsuccessful/pending disability assessment



C. Currently receiving disability benefits



D. In paid employment

Zoe (38)	Had her first child at 15 & first claimed **Income Support (IS)** as a young single parent	Completed qualifications & became employed full-time in a number of professional jobs, claiming **Jobseeker's Allowance (JSA)** for short periods between jobs	Moved to new area & employed full time, however Zoe experienced physical, sexual & psychological abuse from partner so took time off work & claimed **Statutory Sick Pay (SSP)**	Applied for **Universal Credit (UC)** to help with paying rent & top up SSP while off sick but only given £50 & food vouchers for four months with no help with housing or Council Tax - ended up in four months of rent arrears by the time she returned to work	After returning to work full-time, Zoe experienced more abuse resulting in PTSD, so took 3 months off work & re-applied for **UC**.	Zoe was given two repayable advance payments due to delayed first payment, followed by a small amount one month & then nothing any of the subsequent months so she has been without an income besides **SSP**, with no help with rent or Council Tax.	Currently in phased return to work 2 days a week but still in rent arrears & having to use fuel vouchers for gas & electricity, & food bank & supermarket vouchers & can barely meet transport costs to travel to work
Tracy (41)	First claimed **Income Support (IS)** when pregnant with first child as a single parent	Found flexible employment in hospitality so stopped claiming benefits, however income did not cover rent, bills & living costs, so went back on to benefits	Met her partner (now husband) & moved in together, however his income meant she was no longer eligible for benefits so stopped claiming & was financially reliant on him	Had son who was diagnosed with Autism so she claims **Carer's Allowance (CA)** & **Disability Living Allowance (DLA)** on his behalf to cover additional daily living costs associated with his disability	Tracy has been employed part-time for almost 5 years while claiming **CA** and **DLA**, with flexible hours around husband's job. Recently told she earned £17 over earning threshold for **CA** entitlement & has had her payment stopped & is waiting to find out whether she will get next payment		
Kerry (48)	First claimed benefits during gaps in employment after leaving school & working in temporary roles	Recently applied for **Universal Credit (UC)** because zero-hours contract job offered her no hours for several months	By the time the claim had been processed Kerry was offered full-time hours again so is currently not on benefits				
Alison (50)	In steady employment since leaving school, then married & had children & was financially reliant on husband who was in a well paid job	Relationship breakdown resulted in her being left with husband's debts & she began claiming benefits as a single parent & living in a rented house. Found part-time employment	Enquired about Council Housing but was told she was a low priority & would have to move to a different area away from her children's school, & later informed she had been taken off the list. Moved house a couple of times due to unaffordable rent costs.	3 years ago new partner (now husband) moved in with Alison & children. He had retired & was receiving work pension but returned to work, which affected Alison's benefit entitlement	Put in a new claim for **Universal Credit (UC)** as this was being rolled out to replace existing benefits, but was barely entitled to anything owing to new husband's income. Husband then went part-time due to health problems. Alison still employed part-time.	Eldest child going to University affected housing & child elements of UC causing them to lose almost £400/month	

6.3 Stigmatising by design: Deterrence, accessibility and administration

6.3.1 Stigma and the power of deterrence

A powerful form of institutional stigma in the benefits system is the deterrence designed into the process of accessing and navigating the system. As highlighted in chapter 3, stigma and deterrence were designed into early social security policies to discourage those that may consider exploiting the system. My data demonstrated strong evidence of the persistent role of deterrence in the contemporary system and its effectiveness in making many of my participants reluctant to claim regardless of their entitlement to support. It also illuminated the harmful impacts of this form of stigma on the participants' lives. Deterrence manifested most commonly in delays to benefit claims but in some cases resulted in participants not applying for benefits to which they might be eligible, demonstrating the power of this form of institutional stigma. Non-take-up of benefits by eligible groups is a pressing issue with important implications in terms of telling us about the function of stigma, as well as the various costs of such stigma for marginalised groups (Spicker, 1984; Corden, 1995; Mood, 2006; Baumberg, 2016), however, given the obvious difficulty of accessing a sample of 'eligible non-recipients', it is, by definition, an under-researched area (Craig, 1991, p.537). This finding is therefore significant.

Several participants delayed starting a claim for benefits, despite being eligible, reflecting the longstanding stigma intentionally designed into the social security system as a deterrent to prospective claimants that may consider abusing the system and therefore distinguish between the so-called deserving and undeserving poor (Walker, 2014). This includes the reputation of the system as being punitive and difficult to access as well as a reluctance to claim due to feelings of guilt about relying on state support. This deterrence in the design of the social security system still appears to be a prominent feature amplified by the increasing conditionality, punitiveness and cuts to benefits that shape the current social security system.

Indeed, Amy (23, UC; unsuccessful PIP assessment) was living in her family home with her mum and brother with no source of income and bills to pay, yet was deterred from and '*scared*' about claiming Universal Credit owing to its negative reputation:

> *For a while, for a long while, I was just sitting there jobless...erm... not in university, and... I didn't want to join the Universal Credit because of all the people... like my sisters who are under Universal Credit used to tell me*

how stressful it was, and I thought, "I don't want to get put through that, I'm under too much at the moment, I don't really...I really don't want that", and they knew it would really, really bother me if I was on it. But I got a point where I just had nothing, and I didn't know what to do.

Claiming was a last resort owing to desperation and a lack of alternative options despite being all too aware of the 'stressful' nature of claiming Universal Credit, including the heavy focus on work-related obligations, mandated through the Claimant Commitment. These worries about how manageable the behavioural conditions attached to receipt of Universal Credit would be for her were compounded by the fact that Amy suffered with Anxiety and Depression and had recently left university due to experiencing psychosis. She had also recently been diagnosed with Autism which affected the sorts of jobs that might be suitable for her. These issues were coupled with an awareness that she would most likely be expected to apply for 'any job' regardless of its suitability. More recently, Amy also applied for Personal Independence Payment (PIP) for extra financial help with daily living costs due to her disability but delayed applying for this due to the arduous process involved. The delay applying for PIP, a non-means-tested benefit, is interesting as non-take-up of benefits is more commonly associated with means-tested benefits owing to the increased stigma of such benefits (van Oorschot, 2002), however with the changes to disability benefit entitlement in recent years - although PIP is not means-tested - still requires recipients to undergo degrading processes in order to apply and be deemed eligible.

This reluctance to claim was reflected in Kerry's account of delaying reapplying for benefits after her zero-hours contract job in the service sector failed to offer her an adequate income to live on. When she experienced four months of barely any hours, she relied mostly on inheritance from the sale of her parents' house rather than claim Universal Credit, and only claimed as a last resort when she had run out of money;

I didn't have any work… very much work anyway, being offered to myself 'cos I'm in all zero contract hours - between January and April, I think I'd made in total about four hundred quid, and the rest I was living off my mum's money, so I may not have kept a watch on it, but I never know when work's gonna come in or when it isn't. It's not like I'm a builder or something, and you know, the sort of work where you know when it's gonna be and when it isn't- you don't know in my line of work. So, I applied for

> *this Universal Credit in the April - I just thought, I honestly… I mean, to be honest I just thought, well at least if I get my rent paid, it'll help… 'Cos I'd, you know, got to the point where I needed that* (Kerry, 51, not currently claiming).

While Kerry had previously claimed Jobseeker's Allowance for short periods between jobs prior to the rollout of Universal Credit, her reluctance to claim Universal Credit was in part shaped by a lack of information or transparency about how the new benefit worked and its eligibility criteria; her only knowledge of it was shaped by negative news stories of people's difficulties accessing it and delays to payments. This absence of information affecting people's likelihood of claiming benefits reflects Davies' (1978) findings from his study about the take-up of free school meals; an absence of information was a principal reason for shortfalls in uptake alongside mothers not having the time or energy for coping with a complex system. Such accounts reflect research suggesting that many people who are eligible for benefits, and to a lesser extent, tax credits, fail to take them up because of the stigma attached to claiming and the considerable administrative hurdles and behavioural conditions claimants must comply with (Baumberg *et al.*, 2012; Baumberg, 2016), which is arguably an intentional effect of the system's design.

This stigma and deterrence shaping access to benefits was also reflected in the accounts of women with disabilities, who were deterred from claiming despite being eligible. Sue (53, ESA & PIP) was born with Spina Bifida, however she remained very active and worked full-time until she was 35 when she got divorced, was struggling financially and suffering with depression:

> *When I did go on benefits, for some reason I felt guilty for claiming them, even though, like, I was perfectly entitled to the money, and I had been all me life entitled to it, but I'd never claimed it, I'd...I just worked full-time until I couldn't.*

This reluctance to claim disability benefits, despite being entitled, was in part shaped by Sue not identifying as disabled for most of her life, having walked unaided and being able to live a very active lifestyle until recently when she had to begin using a wheelchair due to a further deterioration in her mobility. However, the 'guilt' Sue experienced is reflective of the

stigmatising ways that benefit recipients are framed as undeserving in the popular imaginary. This guilt was in part connected to being unemployed:

> *For some weird reason, I felt guilty for not working. Because I'd always worked, and I felt guilty about claiming this money that I was entitled to. It's stupid…. I was entitled to it. I did have disabilities. I didn't have to lie on the form. And they still gave it me.*

Sue's account demonstrates the power of institutional stigma shaping and characterising the benefits system such that the prospect of claiming, especially while not working, is tied up with feelings of shame and embarrassment, deterring people from claiming a benefit they are entitled to. Sue's emphasis on her entitlement and her need to qualify the *genuine* nature of her claim in saying she did not have to lie on her application form reflects the divisive logic and selectivity embedded in the structure of the benefits system whereby claimants are stratified into different groups according to their perceived deservingness and eligibility. This divisive logic has extended to disability claimants in recent years whereby the boundaries of deservingness have been redrawn and disabled people are subject to increased demands to prove their eligibility for benefits through rigorous application forms and a Work Capability Assessment which determines which group disabled claimants are placed into, and demanding existing disabled claimants re-apply to have their entitlement reassessed (Ryan, 2019). Despite her claim being accepted and her being deemed unable to work, Sue felt undeserving of the money she received and began volunteering at a hospice which she continued doing for twelve years until the deterioration of her mobility meant she could no longer work at all.

The pervasiveness of institutional stigma was perhaps most apparent in former Jobcentre employee Lucy's account of delaying her application for disability benefits. Lucy explained that despite having a chronic, painful rheumatological condition that was triggered while pregnant with her son, she relied on Income Support for several years rather than having to endure the 'degrading' ordeal of applying for disability benefits:

> *I waited 'til he was five because…I know that the pressure that they put you under, and the stress of having to claim sickness benefit… and so, I was on less money, if you like, but it outweighed the…degrading circumstances that you would have to go through to get that extra support. It wasn't worth it. So we just struggled by until he was five [when her eligibility for Income*

Support ended], and then I had to claim sickness benefit because there was nowhere else I could go really, you know? (Lucy, 44, ESA & PIP)

Here, institutional stigma, characterised by the 'degrading' experience of being assessed for sickness benefits, was a central factor deterring Lucy from putting in a new claim, despite being diagnosed with a medical condition impacting her mobility. Like the other women mentioned, claiming was a last resort due to having no other options of financial support. Moreover, the fact that she *chose* being worse off financially for several years over having to go through the 'degrading' process of applying and being assessed for disability benefits is a damning indictment of the benefits system and demonstrates the power of stigma in dissuading eligible people from applying. As will be discussed later in the chapter, when Lucy did eventually apply, her prior assumptions about this experience, influenced by her experience working as a Jobcentre Advisor, were confirmed.

The reluctance and fear which shaped these women's delayed benefit claims was also exemplified in the accounts of women who, despite having debilitating health conditions affecting suitability for work, were deterred from claiming disability benefits. Jasmine (22, UC), for instance**,** was deterred from attempting to claim benefits because of ill health, despite having mental health problems and medical diagnoses of abdominal issues causing pain, sickness and difficulties with weight management, as well as a hormonal condition causing pain and affecting her mood. She told me;

The Jobcentre don't get it. For me it's an illness…stopping myself being sick near enough every day is an illness… There can be times throughout the day when I get dizzy and I've got to sit down because I feel like I'm gonna pass out because I'm gonna be sick… but to them it's not a disability... it's not cancer, it's not "oh you've got a couple of limbs off"... you're alright to work, d'ya know what I mean? You can still sit at a desk and do stuff... in the eyes of them. ...Can still answer the phone...can still walk about and use my legs…so in their eyes, there's nothing...even if you had cancer, they would still sit there and say, "you can work". You're dying- "you can work".

Jasmine's reflection demonstrates the stark disconnect between her own subjective lived experiences of everyday pain and discomfort due to her health conditions and her perception of the DWP's perspective on the impact of disability and ill health on a person's suitability to

work. This notion of the DWP not recognising or respecting the impact of people's health conditions is not something Jasmine has imagined but reflects 'unprecedented assault' on the rights and entitlements of disability benefit claimants during the last decade, legitimised by stigmatising narratives about disabled benefit 'scroungers' in political and media discourse (Ryan, 2019, p.26).

The recent shifts can be seen in terms of the intentional recategorisation of disabled claimants and scaling down of disability benefit expenditure aided by the unprecedented intensification of the disability benefit testing regime for new and existing claimants (Stewart, 2016; Pring, 2017; Ryan, 2019). Evidence suggests that many claimants who were previously in receipt of support had their support withdrawn or downgraded following reassessments (Gov.uk, 2021a), thus shaping Jasmine's perception that even if she had a terminal illness she would be deemed fit-for-work. Consequently, she was deterred from applying, and instead claims Universal Credit. However, Jasmine's chronic mental and physical health conditions create additional challenges to fulfilling the arduous obligations of her 'Claimant Commitment' and make finding suitable work more difficult.

All these accounts exemplify the power and scope of institutional stigma embedded in the design of the social security system, impacting both its reputation as punitive and difficult to access, and the reality of the processes involved in applying for and claiming benefits. Just as stigma and deterrence were deliberately designed into early attempts to manage and mitigate against poverty in Britain, deterrence shapes engagement with today's social security system whereby eligible individuals postpone putting in a claim due to fear about the processes involved and, for some, guilt about the prospect of claiming until they are left with no alternative. This is compounded by a lack of clear, accessible information about possible benefits to claim and their eligibility criteria. The stigmatising deterrent power of the system was apparent for participants with and without disabilities and was seen overtly in their accounts of delaying claiming benefits despite being eligible but also less visibly in the accounts of those who did not claim benefits they may be entitled to. In all the cases outlined, this form of stigma had significant material consequences and costs, as it caused the women to delay or avoid claiming benefits thus adding to their economic hardship and stress. The processes involved in claiming and maintaining a benefit claim and how they are experienced and understood will be further discussed in the following sections.

6.3.2 The process of applying for benefits

A key mechanism of institutional stigma in the design of the benefits system is the arduous process involved in applying for support. The process of applying acted as a further deterrent by making the prospect of claiming benefits daunting and the experience challenging. As Lucy (44, ESA & PIP) commented, '*the hoops you have to go through, it's unreal*.' As discussed earlier, the difficulty of applying for support is an intentional deterrent feature embedded in the social security system from its inception, and a clear manifestation of institutional stigma, whereby claimants have always been forced to undergo difficult and degrading administrative hurdles to have their claim considered. This was reflected across the accounts of almost all participants, on a variety of benefits, with them reflecting on the time-consuming and emotionally draining nature of applying for support.

A common theme which emerged among the participant group, regardless of the type of benefit they claimed, was the notion that they required some level of specialist knowledge to understand what was required and successfully apply for benefits. This idea was compounded by a lack of information about eligibility. This was exemplified when Michelle (48, UC & unsuccessful PIP assessment) told me about a woman she had met at the Jobcentre who had offered to help her fill out her application because she professed to '*know exactly what to do*', leading Michelle to conclude that *'you've gotta know how to work the system, basically'.* The notion that people who successfully apply for benefits are 'playing the system' emerged in several interviews reflecting common stigmatising tropes. This perspective is also reflective of the divisive logic embedded within a selective rather than universal social security system (Spicker, 1984), particularly one which is underfunded and stripped back to a point where prospective claimants must work hard to compete to be recognised as deserving and in need.

As well as having specialist knowledge, Dawn, a single mother claiming Universal Credit, expressed the idea that certain skills were required in applying for benefits:

> *For me, because I'm quite bright, the process of all the forms and stuff like that is quite simple, but my ex-partner, he wasn't able to fill forms in because he just couldn't understand what information they were looking for, or why they were looking for it, so I can see that it would be difficult for somebody who isn't... quite, you know, up on their Maths or English skills (Dawn, 36, UC).*

Dawn's observation reflects the often daunting and difficult nature of applying for benefits, whereby most prospective claimants face confusion over what information is required. Moreover, despite generally finding filling out forms relatively simple, Dawn discussed the difficulty of applying for Discretionary Housing Payments (DHPs) to help with her rent costs owing to the removal of the Spare Room Subsidy, known as the 'Bedroom Tax'. She explained:

> *I had to apply for Discretionary Housing Benefit because I've got an extra bedroom, and obviously the Universal Credit wouldn't cover that extra bedroom cost, so, that's quite a difficult one because you've gotta put down your exact outgoings for like everything, including toiletries and stuff like that- they don't take it as a whole, you have to separate it all out, and...it is quite confusing. And then you have to do that every couple of months because you have to reapply every couple of months because it's a limited fund'*

The 'confusing' and 'difficult' nature of the application for DHP, which recipients must routinely reapply for due to the limited nature of funding for the benefit, again demonstrates the intentionality of making the benefit complicated to access. The limited fund, where demand often exceeds the available amount (Wirral Council, 2021), reinforces the divisive, selective nature of the British social security system whereby prospective claimants are grouped into categories and awarded support based on perceived deservingness rather than fundamental human rights to shelter and security. Moreover, the considerable effort and time-consuming nature of having to itemise all outgoing spending may deter those in need from applying, which is arguably the intention.

The deterrent nature of lengthy application forms was mirrored in participants' discussions of applying for Personal Independence Payment (PIP). As Michelle explained, the form was '*like a book*', causing her to need to ask for an extension on the one-month time limit imposed. The daunting nature of the long application form and the limitations of the time limit was also reflected by others who had applied for PIP. As Amy told me:

> *When we tried to apply for PIP, erm... they send a form... and they give you only a limited amount of time to fill out the form... which is something I don't like...because it can take people a while to fill out a form, and... we handed it in like, just scratching the late mark. (Amy, 23, UC; unsuccessful PIP assessment).*

Rather than merely accepting the difficult bureaucratic processes of applying as a logical, necessary part of the system, some participants understood the lengthy application form as serving an intentional deterrent function:

> *I'm sure they send you that just so you don't fill it in, you're just like ugh. Like I do think that's a put off* (Michelle, 48, UC & unsuccessful PIP assessment).

This awareness of the intentionality of the barriers to claiming benefits mirror's Tyler's (2020, p.18) observation that people on the receiving end of stigmatisation are often 'cognisant of the ways in which the "stigma machines" in which they find themselves entangled have been engineered', but nonetheless owing to the relative powerlessness and structural inequality they face, the extent to which stigma can be resisted is limited.

In addition to the perception that specialist skills and knowledge are required to successfully apply for benefits was the idea of needing help from others in order to apply. For instance, Joanne's neighbour worked as a benefits advisor, so was able to use their specialist knowledge to help her reapply when her Disability Living Allowance was switched to Personal Independence Payment. Moreover, Michelle's friend whose husband had claimed disability benefits helped her to apply for Personal Independence Payment, and Amy heavily relied on her mum and brother to help her with her Personal Independence Payment application. Amy explained:

> *I only have my mum and my big brother. My mum isn't well educated really on any of it [the benefits system], but she understands what I go through, and my brother is a frontline social worker, so he knows his stuff. And so, they both help me with these things, but…erm...they can both be quite busy, or just have their own things in life to do. There's apparently people that can help you fill in these sorts of forms that you can just book appointments with. And so, we wanted to get an appointment with one of them people, but it...it couldn't...it just didn't happen. It took a while for us to fill out the whole form because... I filled out what I felt was comfortable, but they didn't really trust it was gonna be… correct 'cos I see things differently to how other people see them...* (Amy, 23, UC; Unsuccessful PIP assessment).

The fact that many participants relied on help from experts and friends who "know their stuff" reflects the challenges of applying and the reputation of the system as difficult to access, an aspect designed into the system as an intentional hurdle for claimants to overcome to prove their deservingness. However, this support was not always available, as illustrated by Jasmine (22, UC):

> *I had to move on Universal Credit [from JSA] when I moved here, 'cause it was already rolled out over here, if that makes sense, 'cause where I'm from it wasn't rolled out yet ...so I came over here and that was really hard, 'cause obviously I had no family, no one to help me through the forms*

Applying for a new benefit without help when she moved to a new area was challenging for Jasmine, reflecting the hurdle that application forms present for the many prospective claimants who do not have people with specialist knowledge to assist them.

Furthermore, the nature of questions in the application forms also made applying for benefits more challenging. Lucy (44, ESA & PIP) described her experience of applying for PIP:

> *It was 60 pages long. And, again, like the assessments, they're designed to trip you up. So if you say, for example, "I struggle with chopping up food", further down the line, there'll be another question that's worded differently, asking you the same thing. But it depends on how you answer it as to whether or not you get sufficient points.*

The repetitive nature of questions led Lucy to conclude that the forms are underpinned by a mistrust of prospective claimants and are therefore designed to test them by asking similar questions in different ways at different points in the form, making filling the form out lengthy and confusing. This again mirrors Tyler's (2020) observation that stigmatised groups are often very aware of the mechanisms of stigma being imposed on them but are left with limited alternative options.

Tracy's experiences also exemplified the challenging nature of applying for benefits, both in terms of being arduous as well as emotionally difficult. In order to be deemed eligible for Disability Living Allowance to help with the extra daily living costs associated with her son's disability she had to fill out a lengthy form. She told me:

> *The DLA - that was a lot harder [than applying for Income Support which*

she had claimed previously]. It took me about three weeks to fill the forms in. And they say you've gotta write about your worst ever day, so when you think of what your worst ever day is with your child, and writing it down, it's not nice to... but this is what you've got to do because they don't know your child…and they're looking at a piece of paper and if you say, "oh yeah, he's a good kid" and all this, they're not going to help you out at all, so you've got to put....[negative things]. It makes you feel a bit low and a bit depressed like, because you're having to write all sad and… things. That's due for renewal next year so I'll have to go through all that again. (Tracy, 41, Carer's Allowance & DLA for child).

Having to undertake the unpleasant, emotionally draining task of documenting in detail the most difficult day with her son to have her claim for financial support considered is a shocking and powerful example of the institutional stigma embedded in the structure and design of the benefits system. The long and emotionally demanding process involved serves as an intentional deterrent barrier to prospective claimants. Moreover, her account highlights the fact that under the austerity-driven forms of conditionality in place for disabled people, once a claim for disability benefits is accepted, their right to financial support remains conditional and they will be forced to undergo the process of reapplying again at routine intervals, as requested by the DWP, even where a health condition is chronic and unlikely to improve.

The participants' accounts therefore demonstrate the considerable work and emotional costs involved in overcoming the first hurdle and having their claim for social security benefits considered. Despite the variation in benefits received within the participant group there was a good degree of commonality across the participants' accounts of applying for benefits, particularly for those who have applied or had to reapply for a new benefit in recent years. The institutional stigma embedded in the application process manifested in various intersecting ways from the time-consuming nature of applications to the intrusive, complicated and repetitive nature of the information required which makes applying and reapplying for benefits a daunting prospect. The considerable bureaucratic hurdle of applying meant that some of the women I spoke to needed help from professionals or friends to complete their applications, whereas this was not possible for some, raising concerns about the many people without such support systems in place. Owing to the barriers to applying and the reputation of particular benefits as being difficult to claim, there was a common perception among participants that

insider knowledge and skills enabled certain claimants, particularly disability benefit claimants, to successfully claim and 'play the system', demonstrating the power of stigma in shaping public perceptions of benefit claimants. The transition towards a digital-by-default benefits system also presented barriers and issues for many participants and acted as a further deterrent, as will be discussed in the following section.

6.3.3 Universal Credit, administrative problems and the transition to a digital-by-default system

The bureaucratic processes involved in applying for and maintaining benefit claims, which are increasingly digitised, constitute a further deterrent aspect and manifestation of institutional stigma in the design of the social security system. Along with many other welfare states globally, Britain is increasingly shifting towards a 'digital-by-default' system, whereby many elements are administered and managed using digital technologies, including applications, benefit calculations and payments and communications between welfare officials and claimants (Alston, 2019). This digital transformation is particularly evident in the shift to Universal Credit, the UK's first digital-by-default service (Alston, 2018, 2019; Summers and Young, 2020) introduced in 2013 as part of the major overhaul of the social security system brought out by the Welfare Reform Act 2012 (Legislation.gov.uk, 2012). Though such a shift has been implemented with the ostensible aim of simplifying the system and improving administrative efficiency (Alston, 2018, 2019; Summers and Young, 2020), this alleged simplicity was not experienced as such for the participants interviewed. Rather, the switch to Universal Credit and automation of parts of the system were found to pose significant challenges and problems in terms of barriers to accessibility, issues with communication between claimants and advisors, and administrative errors and issues with payments.

For claimants yet to transition to Universal Credit, the online aspect was daunting. For instance, Christine (58, ESA & PIP) told me she would struggle with this due to a lack of digital skills, reflecting Alston's (2018, p.8) findings that the full rollout of Universal Credit could pose 'a digital barrier that effectively obstructs many individuals' access to their entitlements', with 'women, older people, people who do not speak English and the disabled' 'more likely to be unable to overcome this hurdle' due to lack of internet access or a lack of skills and confidence navigating an online system. Christine had indirectly experienced the effects of the shift to Universal Credit because her ex-partner claimed it:

> *He found it quite difficult. I imagine that would cause a lot of problems for people that aren't really good with computers doing all that stuff because it's all online, isn't it now? And they expect you to get a job online. It used to be pen and paper or phones* (Christine, 58, ESA & PIP).

Even for participants like Jasmine (22, UC) who professed to be '*quite tech savvy*' and have reasonable digital skills, the transition to applying online for Universal Credit was still challenging and time-consuming.

Beyond merely constituting the benign simplification and modernisation of the benefits system, such reforms are an integral part of the ideological recrafting of the welfare state under austerity. The digitisation of the system has been introduced alongside and in conjunction with neoliberal economic policies including deep cuts to the welfare budget, the toughening of eligibility criteria, the establishment of 'demanding and intrusive forms of conditionality' with a push towards behavioural adjustment, the introduction of a harsher sanctions regime and a strong emphasis on individual responsibility (Alston, 2019, p.5). Digital technologies help to facilitate and legitimise this smooth transition whereby online technologies are presented as 'neutral' and logical but reflect particular 'values and assumptions' that may ignore or contravene human rights (Alston, 2019, p.5), and are utilised as ways to 'automate, predict, identify, surveil, detect, target and punish' recipients (p.2). One way this manifests is through the online portal for Universal Credit where communications between a claimant and their Job Coach between appointments and evidence of work-related activity is undertaken via an online system, offering increased opportunities for the surveillance of claimants while creating more distance between advisors and claimants. The online portal was understood by some as a means by which they could be subject to additional surveillance and scrutiny and was thus a source of additional pressure and stress. Christine (58, ESA & PIP) observed this with her ex-partner who was claiming Universal Credit:

> *You know doing the Job Search online with Universal Credit… oh, it's terrible. It stressed him out! Urgh God! He'd leave it and put it off, but then he'd have to do it because you couldn't fake it, you had to do it, you know? They could check everything, and they did. It's really hard for people on Universal Credit, you know, people who've gotta meet these targets, do what they're told, to get money just to eat, d'ya know, and pay the bills. They're always calling you in and threatening sanctions and taking your*

> *money off you, and there's things that happen that you've got no control over, but they will penalise you for like, late appointments, which you haven't got because of late emails or something and you've got to really know how to use all that stuff to make sure you don't miss an e-mail.*

This pressure on claimants to document their job seeking activities on an online portal for their advisors to see and to ensure they do not miss emails from the Jobcentre that might risk them having their benefits sanctioned represents the increasing neoliberal emphasis on individual responsibility in the contemporary benefits system. Alongside and in conjunction with increasing scrutiny and pressure on claimants, participants noted increasing distance between themselves and their advisors following recent welfare reforms which signified the further withdrawal of support in the provision of social security. Jasmine (22, UC) observed:

> *You get nothing… any sort of communication with your advisor. I mean you can send them a message on your online account, but it doesn't mean that they're gonna reply, it could take them 3 days to reply to you... I feel like...it's so few and far between.*

This lack of reliable, personal communication with her advisor left Jasmine feeling unsupported and as though her needs were not prioritised. Moreover, delays in communication from Jobcentre advisors contrasted with the rigid demands placed on claimants which reflected and reinforced the unequal power relations between claimants and advisors. Furthermore, as Jasmine explained, the online system for Universal Credit was '*not always reliable'*, causing her anxiety and '*panic*' about not getting paid. For instance, she highlighted inconsistencies in communication where she opted to be contacted by text message about her benefits but then received important information about her benefits via email.

Another problematic aspect of the redesign of the benefits system and the introduction of Universal Credit was the shift to a single monthly household payment which was designed to emulate the payment of monthly salaries so as to prepare claimants for 'the world of work' (DWP, 2017). In addition to this attempt to mimic paid work, a monthly payment schedule assessed and administered through automated processes makes the system simpler for those designing and managing it. However, the single monthly household payment presented difficulties for the six women I interviewed who were claiming Universal Credit. For example, Dawn (36, UC), a single parent, explained:

> *It's harder with having just the one payment monthly...it makes it more difficult for you to... I'm quite good on a budget, but even I struggle 'cos I've always had a written budget for my weekly incomings and outgoings and stuff. And it just makes it that bit more difficult to... you know, if something comes up in that month that it was unexpected, you've then got to make a decision between... well, do I put the money in the electricity, or do I put it in the petrol tank to be able to take my children to a hospital appointment? So, it is quite difficult. I think fortnightly payments would be better.*

This difficulty reflects the findings of existing empirical research with social security claimants such that by Summers and Young (2020) who argue that the administrative convenience of switching to monthly payments is not aligned with the lived experiences of claimants as it may be difficult for claimants to adjust to and may result in financial hardship. Moreover, because entitlement is assessed and managed using real times earnings information (RTI) from HMRC during a fixed monthly assessment period and then paid monthly in arrears, Universal Credit payment amounts vary from month-to-month (Summers and Young, 2020), making budgeting and planning even more difficult.

This was found by Zoe (38, UC) who was claiming Universal Credit to top up her income while in a phased return to full-time work due to suffering with Post-Traumatic Stress Disorder. Owing to the unpredictable nature of her Universal Credit payments, Zoe was in arrears with her rent payments, could scarcely afford the travel costs to commute to work and was relying on food banks as well as fuel and food vouchers. These difficulties represent the widespread harm and violence inflicted by administrative decisions about the design of the social security system. Such decisions wilfully ignore the lived experiences of claimants, while working in the interests of the powerful, thus constituting an aspect of institutional stigma.

In addition to the monthly assessment and payment, Universal Credit consolidates what would have previously been multiple payments derived from various benefits into one single amount paid directly to the claimant rather than housing benefit being paid to a landlord which, again, places additional responsibility on claimants and makes money management more challenging. For example, Lorraine (44, UC; awaiting PIP assessment), a mother of two, reflected:

> *It's all in one lump sum. We used to get like the housing benefit separate, income support separate, Child Tax Credits separate. It was all like every*

> *four weeks, but now it's on the same date every month. It's all rolled into one payment. So it means we get less. Because it's not every four weeks now, where you'd have a few extra days - all them extra days add up so you'd get like a little bit of extra at the end of it. It's not like that now because it's the same date every month, that's it. That's what day you get it on. And once you get that lump sum and you've paid everything, there's nothing for another month. I mean, at least when you used to get paid fortnightly, you could rely on that. You know, oh, I get paid in two weeks, so it's not too bad. I haven't gonna go a month.*

Moreover, because of the design of Universal Credit and the monthly payment, new claimants must wait a minimum of five weeks for their first payment. This five-week period is built into the system and comprises the monthly assessment period plus an additional week added to process payments (Gov.uk, 2021b). This delayed first payment was reported to be a source of stress and financial difficulty necessitating the acceptance of an 'advance payment' which is then deducted from subsequent Universal Credit payments over the following year. As Dawn explained:

> *Recently I put in a claim for Universal Credit because of a breakdown in my relationship. But there is quite a delayed period between when you first claim to when you first get paid, and they offer you up to quite a large sum of money upfront, but that gets taken off your money monthly, and I was able to use common sense and work out before I went how much I'm likely to need for the time scale...erm... and then chose a little bit less than that because I knew the payments were gonna be quite a lot over the next year. But if you're not able to see into the future then, you know, it is going to be a bit of a struggle to make sure that you're budgeting, otherwise you're really gonna feel it each month (Dawn, 36, UC).*

Dawn's account highlighted the difficulties posed by the built-in waiting period for initial Universal Credit payments. Despite her very careful budgeting and forward thinking to avoid falling into too much debt with the repayable advance payment, Dawn had to use a food bank during this period. Similarly, Jasmine (22, UC) began claiming Universal Credit after moving to a new area and found the five-week wait for a first payment extremely difficult. Her landlord fortunately allowed her to delay paying her rent until her first Universal Credit payment but

she still fell into financial hardship and debt due to the delayed first payment which was not helped by an unexpected vet's bill. This hardship reflects findings from the Trussell Trust (2019) arguing that the five week wait forces people into destitution and causes many to have to use food banks. These administrative issues brought about by welfare reform are not merely omissions or unintended consequences but are the outcome of *deliberate*, callous decision-making in the architecture of the contemporary welfare state shaped by a desire to ration welfare expenditure and modify claimant behaviour and thus they constitute a mechanism of institutional stigma.

The rigid way that entitlement for Universal Credit is calculated for a specific one-month period may also pose difficulties for claimants whose circumstances change, for instance due to new cohabiting relationships or relationship breakdowns, gaining or losing employment, whereby the date they report the change has a huge bearing on how much they are paid. Dawn, for instance, reported her change in circumstances to the DWP the day her and her children left the family home because of a relationship breakdown. However, she was later informed that she had been overpaid and she had to go to a food bank as a result. This account supports Summers and Young's (2020, p.182) assertion that the changes to the system brought about by welfare reform and the introduction of Universal Credit mean that the 'complexities in the social security system are further shifted out of sight and onto the shoulders of claimants themselves'. This, again, is a powerful manifestation of institutional stigma in the design of the benefits system facilitated by unequal power relations.

The inflexibility of benefit payment thresholds and calculations was also demonstrated in Tracy's account. Tracy (41, CA & DLA for child) had her Carer's Allowance, which she claims to help her with the extra costs of caring for her son who has severe Autism, discontinued because she had earned seventeen pounds over the earning threshold for the given period in which her benefits are calculated, in her part-time job at a fast-food restaurant. At the time of the interview she did not know whether she was going to receive her next payment of Carer's Allowance as she was waiting to hear back from the DWP. Administrative errors were commonly experienced across the participant group. Sue (53, ESA & PIP) informed DWP that she and her partner were getting married and moving in together but this was not recorded due to an administrative error causing the couple to be told they owed money back. Eventually this was rectified after they found her letters informing them of their change in circumstances but

this still caused undue stress and worry; communications from the DWP were underpinned by mistrust and the stigmatising assumption that she was attempting to exploit the system.

These administrative errors contributed to financial insecurity, stress and worry due to their financial impacts as well as having to undergo considerable efforts to evidence their deservingness and rectify errors that they were not responsible for. The onus invariably fell on claimants despite them having taken the necessary steps to notify the DWP about their changed living arrangements. These administrative errors were common, reflecting the DWP's admission that the costs of such errors outweigh the costs associated with benefit fraud. Errors such as these have been found to have serious consequences for claimants' lives by causing extreme hardship, debt, severe mental distress and even suicide, as was found in the inquest into the death of Philippa Day in 2018 following a long struggle with her Personal Independence Payment claim (Leigh Day, 2021).

6.3.4 Financial autonomy and the design of the benefits system

The administrative rigidity and complexity experienced by those attempting to navigate the contemporary benefits system also manifested in gendered forms whereby payment structures are based on gendered assumptions and pose gendered risks. From its inception in the post-war period, the British social security system endorsed and reinforced traditional ideals of the family and marriage, for instance through the provision of the 'family wage' encouraging female dependence on their husbands while excluding and disadvantaging families that do not fit this model, such as lone parent families. The normative values underpinning the initial design of the social security system remain prominent today as evidenced in the eligibility rules for cohabiting couples (Griffiths, 2017). The loss of financial autonomy once a claimant is cohabiting with a partner risks reinforcing women's financial dependence on their partners, puts them at risk of financial abuse and increases the likelihood that they may remain in abusive relationships because they lack an independent income (Women's Budget Group, 2017; Alston, 2018; House of Commons Work and Pensions Committee, 2018; Harding, 2020). Such risks were most strikingly exemplified in Dawn's account. Dawn (36, UC), a mother of four and legal guardian to her disabled step-son. Dawn's benefit trajectory demonstrates the role of the benefits system in reinforcing her financial dependence; on two occasions when her cohabiting partner at the time found new employment after being made unemployed or redundant, the couple were no longer eligible to claim Jobseeker's Allowance, denying her an independent income and assuming financial dependence. Moreover, when her and her ex-

partner claimed Tax Credits as a household, the benefit claim was registered in her partner's name, leaving her feeling '*like a second class citizen*' due to being unable to make decisions that affected her and her children's financial security. She explained:

> *There's been times where I've tried to phone up [the DWP]…to make changes or something like that, and he's had to give his permission for me to speak, which has felt a bit degrading… I didn't get to have a say ... it's almost like you're treated like a child who needs their parents' permission.*

This experience represents a gendered form of institutional stigma embedded in the design of the social security system, also demonstrated in the single monthly payment of Universal Credit to a designated 'head of household' (Women's Budget Group, 2017; Alston, 2018; House of Commons Work and Pensions Committee, 2018; Harding, 2020). This decision was explicitly intended by Iain Duncan Smith (2011) to disincentivise lone parent families and followed the assumption that an overgenerous welfare system had encouraged or caused the increase in lone parent families, and instead promoted cohabitation and marriage (Griffiths, 2017). Hence, again, rather than being an unintended consequence of the way the system is designed, such administrative barriers are ideologically-rooted to govern and punish certain groups of claimants and promote a particular set of ideas about society.

Reflecting on her experiences, Dawn discussed the barriers the benefits system posed in her decision to leave her relationship:

> *The system does make it more difficult for men or women, particularly women who are experiencing any kind of abuse within the family home. Erm, it was certainly a consideration of mine when leaving was how would I be able to manage… erm, you know the fact that I wasn't meant to be able to speak to the people about the changes that were coming to the benefits, because of leaving the household. Erm, it does put up a barrier and that does need to be lessened, definitely. It needs to be more kind of… more equal in the partnership, not that the sole focus is on the person who's earning, it has to be on both - both people should be able to make changes and decisions and things like that in order to… you know… like payments as well, which… the money usually goes to just one person, it should be split*

between the two so that nobody's being financially controlled

Dawn's experiences reflect the findings about the capacity of the social security system to make women vulnerable to financial abuse (Women's Budget Group, 2017; Reis, 2018). When I asked Dawn if she had experienced financial abuse herself, she told me:

> *Not in the sense that he took the money off me, it was more pressurising me constantly to give him money, erm, so I was left with very little money because I had to give him money, whereas if the money was split between the two, that pressure would've been took off me a little bit because he would have had his part of the money and once that was gone I would then be within my rights to say, well, you've spent your part of the money, this is mine and the children's. But he didn't see it that way - if I bought something for one of the kids, I was expected to get something for him as well. So having more of an equal balance in where the payments go would probably lessen that for people in a worse situation than what I was. Financial abuse is just as bad as any other form of abuse- it takes away your self-respect, you know, you feel worthless.*

While her partner did not take money off her, he still controlled her financial choices, which constitutes financial abuse (Sullivan, 2020). This account also reflects the gendered responsibility for household budgeting where in cohabiting heterosexual coupled households this burden disproportionately falls on women (Fawcett Society, 2020). It further demonstrates the validity of concerns about the risks of the benefits system reinforcing gendered divisions and threatening women's financial autonomy (Women's Budget Group, 2017; Alston, 2018; House of Commons Work and Pensions Committee, 2018; Harding, 2020). Owing to the gendered barriers in place and Dawn's lack of independent income, when she did leave the relationship, her and her children were made temporarily homeless while her new claim for Universal Credit as a single parent was assessed and processed. Dawn's story is a powerful indictment of institutional stigma shaping the design of the benefits system; Dawn's right to dignity and financial autonomy was denied putting her and her children at risk. The worthlessness she felt as a result demonstrates the interrelationship between stigma operating at an institutional level, and personal, internalised forms of stigma. This experience has made Dawn more reluctant to enter into a new cohabiting relationship:

> *I think I will be very cautious because of the benefit system… because the*

> *moment I would enter a relationship, even if they're not working, because I'm the main carer of the children, they would instantly become financially responsible for the household and they would then be making all the decisions, and you know filling out all the forms and be able to make all the changes, whereas I would be back in a situation where I kind of lose any kind of financial power that I've got.*

This impact of the system's design on future partnership decisions reflects existing research (Griffiths, 2017) and demonstrates the power of the benefits system intruding into aspects of claimants' personal lives and decisions. Other participants also reflected on the rules around cohabiting couples affecting their eligibility; Alison (50, UC) lost money as a result of her husband moving in with her because he was in employment and her Universal Credit entitlement was assessed on a household basis. Similarly, Sue (53, ESA & PIP) and her husband, who both claim disability benefits, became financially worse-off due to them moving in together because their eligibility was recalculated on the basis of their status as a cohabiting couple.

The institutionalised and ideologically-rooted scrutiny and control over the personal lives of claimants is also reflected in policies such as the 'two-child limit' announced in the 2015 budget and introduced in 2017. This policy restricted additional support to families with more than two children so that families are no longer entitled to the 'child element' of Universal Credit or Tax Credits for subsequent children born after April 2017. Justified by a desire to responsibilise benefit claimants and compel them to 'face the same financial choices' as those not receiving benefits (House of Commons Work and Pensions Committee, 2019, p.3), this callous policy shift was simultaneously driven by a desire to save a projected two billion pounds per year in welfare expenditure (Ibid., p.4). Although Dawn, a mother of four, had not been affected by the policy because her children were born before 2017, she was aware that if she was to have another child she would not be entitled to any additional money to meet the additional needs of bringing up a child and considered this unfair and discriminatory.

Overall, this section has illuminated the unique position that women operate within the social security system owing to the gendered relationships between welfare, work and care (Lewis, 1997), as discussed in chapter 4. It contributes to understandings of the disproportionate impacts faced by women in a system that claims to be gender-neutral but which is and has always been heavily shaped by gendered moral ideologies. As demonstrated, the institutional

stigma embedded in the design of the system causes significant harms and risks which disproportionately disadvantage women in numerous ways.

6.4 Stigma and degradation in the implementation of the benefits system

Working in conjunction with the stigma intentionally embedded in the *design* of the contemporary benefits system, another layer upon which institutional stigma was found to operate was stigma that manifested more explicitly in the implementation of the system. The participants' accounts revealed the existence of stigma framing and underpinning all aspects of the experience of maintaining a benefit claim from the environment of the Jobcentre and the attitudes of advisors to the imposition and effects of behavioural conditionality and the sanctions regime. Such experiences are contextualised by the complex circumstances and health issues that shaped many participants' engagements with the benefits system.

6.4.1 The Jobcentre environment and the attitudes of advisors

For participants who were required to regularly attend appointments at the Jobcentre the experience was described as deeply unpleasant and anxiety-inducing. Jasmine (22, UC), for example, told me that going the Jobcentre sends her anxiety levels '*through the roof*', explaining:

> *The minute I step through them doors like... I hate it. I go in and I go straight to the level that I'm meant to be on, and I just sit there. You have like, you have all these chairs sat round, and like... I feel like I'm in like a cubicle waiting room. I can't sit next to people.*

The clinical, unwelcoming environment of the Jobcentre exacerbated Jasmine's anxiety partially owing to the lack of privacy and having to sit close to other people. This finding echoes findings by Patrick (2017a, p.154) where aspects of the Jobcentre environment contributed to her participants' 'feelings of being stigmatised as an unwelcome, deviant and potentially dangerous population'. Jasmine's anxiety while waiting for appointments was worsened by the fact that appointments often run late meaning she must wait around to be seen. She acknowledged the double standard at play whereby she herself would be sanctioned for lateness and goes to great lengths to ensure she arrives early, yet her advisor is often late for her appointment; this shows a recognition of power differentials at play between advisor and claimant which exemplifies stigma.

Similarly, Amy (23, UC; unsuccessful PIP assessment) expressed a sense of '*dread*' at the prospect of going to the Jobcentre. Amy's fear was partly shaped by her negative association of the Jobcentre with '*people who are rough*'. As she explained:

> *Where the Jobcentre is for me is in a very, very rough area, and usually people who sort of loiter outside aren't exactly the people you wanna hang around with… it makes the Jobcentre look like it's not a place you wanna go to. And inside the Jobcentre it's full of people who are like that… It's not a place I like the idea of going to on my own, but I have had to.*

Amy's perception of the '*roughness*' of the Jobcentre and the people who frequent it contrasts strongly with her own self-identified respectability; she described herself as appearing '*posh*' and '*brought up in a good way*', perhaps indicating her desire to distance herself from stigmatising associations of benefit claimants. This relates to Spicker's (1984, p.121) observation that the British social security system has become residualised to a point where it becomes wholly associated with 'stigmatising characteristics' such as 'poverty, immorality and physical and mental stigmas', it therefore becomes 'tainted with the reputation' of already stigmatised groups.

Moreover, the unpleasant, stigmatising environment of the Jobcentre was shaped by the presence of private security staff who made claimants feel uneasy. For instance, Amy commented:

> *The fact that they have like security on every floor as well isn't exactly...you're thinking, "what does that mean?", "what happens here?", sort of thing.*

The role of Jobcentre security staff in contributing to feelings of stigma was also observed in Patrick's (2017a, p.154) research where she found that their presence echoes the common characterisation of claimants as a 'threatening' population (Fohrbeck, 2014, cited in Patrick, 2017a) but conversely caused her participants to feel 'threatened'.

The trepidation about attending the Jobcentre was also shaped by engagements with staff. The women I interviewed reported mixed experiences with Jobcentre advisors with some having experiences of feeling judged and degraded, reflecting existing research (Finn *et al.*, 2008, p.45-6; Baumberg *et al.*, 2012; Chase and Walker, 2013; Patrick, 2017a, p.153), and others having more positive or neutral experiences. This variation in experience perhaps in part

reflects the discretion exercised by officials in interpreting policies with some choosing to be more or less lenient in the imposition of work-related conditionality and sanctions (House of Commons Work and Pensions Committee, 2016).

This discretion was experienced positively by some participants where advisors were seen to be sympathetic to their circumstances and needs and this was then reflected in the work-related obligations placed on them. Amy, for instance, reflected on having a 'very nice' Job Coach who was 'understanding' of the impact her autism and mental health problems have on her suitability for certain jobs, making her interactions more pleasant and person-centred. Dawn was, at the time of the interview, in a three-month 'grace period', whereby, owing to her and her children being temporarily homeless and staying with family following her relationship breakdown, she was given an exemption from work-related obligations by her Job Coach. However, this exemption was time-limited and she was all too aware of the imminent return of her obligations.

Nonetheless, many participants experienced advisor discretion in more negative ways; Lorraine's mother was in hospital in a critical condition the same week as her husband was laid off from his job and they had to apply for Universal Credit. However, she experienced pressure to sign the Claimant Commitment and sign up for courses without allowances made for the difficult circumstances the family were facing. Commenting on the attitudes she faced, Lorraine (44, UC; awaiting PIP assessment) explained:

> *I think they're disgusting, sat there behind the desk- "you should be doing this, you should be doing that"... I'd like to see them get laid off and then they've got a go to a Jobcentre, and you know, because they haven't applied for a thousand jobs that day, "well, we might sanction you".*

Here Lorraine highlights the inherent power imbalance between advisors and claimants where advisors have the authority to make life-changing decisions about claimants based on their compliance with stringent behavioural conditions. This acknowledgment was reflected by other claimants, who were all too aware of the unequal power dynamics at play in the benefits system. Zoe (38, UC) also faced a lack of understanding about her circumstances when she became too mentally unwell to work after being assaulted, raped and drugged by her ex-partner, and having to endure a draining police investigation, coupled with the stress of her son going to prison around the same time.

> *It was just everything at once, which obviously led to me then having the time off work. So it was a really stressful time, and then you would have things like the Universal Credit was going, "well you know you should've informed us straight away" and I was like, well I didn't know this was the process, I'm going through all this stuff that's happening, I'm… not even able to go to work, I can't think straight, like I'm not capable of doing all these things that you're asking me to do right now. But they were just… and my doctor was writing [to the DWP] to say that that's accurate, obviously, that's why she's not at work, but they were like, well, unless you physically couldn't do it, then that's not good enough, we're not going to backdate your rent payment or anything. Erm, they were just like, really, really not understanding.*

This is a stark example of the dehumanising nature of the social security system where vulnerable people are denied understanding and compassion. As a result of the decision not to backdate her claim or give her sufficient support, Zoe ended up in four months' worth of rent arrears which she had still (at the time of the interview) not managed to pay off, adding to her mental distress.

The institutional stigma in the advisor-claimant relationship owing to the discretionary power of advisors in interpreting and enacting policy manifested in quite an extreme way for Donna. Donna (36, ESA & PIP), who has long-term mental health issues including Bipolar Disorder, told me a Jobcentre advisor called her '*lazy*' for not attending courses she was asked to attend despite the courses not being feasible around childcare responsibilities and being inappropriate for her as she already had the qualifications beyond what the course was offering. This accusation of laziness, which Donna found '*upsetting*', reflects longstanding stigmatising assumptions about benefit recipients and an ignorance of the value and hard work associated with caring responsibilities. The power of benefits stigma in influencing the attitudes of Jobcentre staff was also reflected by Lucy (44, ESA & PIP) who had previously worked as a Jobcentre advisor for ten years. Lucy explained that colleagues '*talking about the customers and being nasty about the customers*' was a common part of the workplace culture; they frequently used derogatory language to describe claimants, insulted their intelligence by using phrases like '*a sandwich short of a picnic*', and made gendered moral judgments like '*so and so with ten kids by ten different dads*'. This language again echoes dominant gendered and

classed stigmatising discourses and demonstrates the unequal power dynamics at play between professionals and claimants where welfare professionals are in a position to label claimants as unintelligent and irresponsible, which may impact how discretion is used and how claimants are treated. Indeed, Lucy revealed that she was disciplined by her '*overzealous*' manager for being '*too helpful*' to claimants in her role as a Jobcentre advisor because generally discretion worked in the opposite direction and '*was used to punish claimants*', advisors were told to '*signpost'* rather than help', and claimants were re-termed '*customers*' reflecting the shift towards a New Public Management approach (Minogue, 1998) under New Labour.

The arms-length approach that Lucy was encouraged to use with claimants so as not to be too helpful and to promote the neoliberal doctrine of individual responsibility was exemplified too in Jasmine's experience:

> *They're alright but not helpful. Does that make sense? Like they're not nasty, they're not looking down their nose at me, but they're not exactly trying to help me find a job, d'ya know what I mean, I feel like I'm doing all the work myself, if that makes sense? Like if I've been given a job advisor I would expect her to help, if that makes sense? Like "ooh I've spotted this kind of job for you, ooh I've spotted this kind of job for it, you could just apply for it, you might not hear anything..." but, we don't get nothing like that. You're so rushed…I feel like when you walk in there you just feel like everybody's rushing around you, d'ya know what I mean, the people, the staff, everyone who...the people in there just want to get in and out, and the staff as well, want you to get in and out. I don't feel like I've got time. So I feel like when I'm with my advisor I've got like five minutes and then ding ding, time's up, you've gotta go now, d'ya know what I mean...next person.*

Jasmine's experience acknowledges that, while her advisors did not appear to judge her or treat her with any obvious disdain, they did not offer much in the way of personalised assistance in finding suitable, secure employment. This impersonal experience was quite widely reflected among many participants where their engagements with Jobcentre staff made them feel unimportant and that their individual needs and circumstances were not considered, thus denoting stigma. Such experiences led Amy to suggest that there should be special considerations in place for people with disabilities and mental health problems so that they are treated with a more '*understanding and gentle*' approach. This perspective corroborates calls

from the mental health campaign group, *Mind*, (Manji, 2020, p.1), for claimants to be treated like '*people, not tick boxes*'. The lack of sensitivity and compassion and, at times, clear discrimination, shown by frontline staff is a significant finding adding to understandings of the embeddedness of stigma within the contemporary social security system.

In conjunction with the Jobcentre environment and the attitudes of advisors, a further mechanism of the institutional stigma at play in the experience of navigating the benefits system is the enactment of various forms of conditionality which are invariably underpinned by stigma.

6.4.2 Austerity and the shift to 'ubiquitous conditionality'

The processes involved in claiming benefits have become increasingly arduous for claimants in recent years and particularly since the wave of unprecedented welfare reforms introduced by the 2010-15 Coalition government (Patrick, 2017a), which can be seen in terms of an amplification of institutional stigma. Reforms in this era include the introduction of Universal Credit replacing six key benefits, the intensification and increasing ubiquity of welfare conditionality, the increasing the scope and severity of benefit sanctions for perceived non-compliance, changes to assessment and entitlement to incapacity and disability-related benefits, and changes to Lone Parent Obligations (Dwyer and Wright, 2014; Haux and Whitworth, 2014; National Audit Office, 2016; Hudson-Sharp *et al.*, 2018). Through these reforms, welfare conditionality has been expanded to include groups previously exempt such as sick and disabled people, lone parents and the under-employed (National Audit Office, 2016; Stewart, 2016; Grover, 2019; Abbas and Jones, 2018; Ryan, 2019).

The next sections of the chapter discuss how these shifts play out and are experienced in the lives of the women interviewed, firstly discussing work-related conditionality, before moving on to the forms of conditionality specifically imposed on disabled claimants.

6.4.3 Work-related conditionality

The welfare reforms introduced by the Coalition government (2010-2015), namely the switch to Universal Credit, were explicitly designed to disincentivise benefits claims by reducing social security provision to 'make work pay' (Osborne, 2013). Such reforms have also involved the amplification of work-related conditionality enforced through the threat of sanctions. This was understood by many participants in terms of pressure to take '*any job*' regardless of its

suitability or long-term security. Jasmine (22, UC) described her work-related obligations under Universal Credit:

> *If we don't do our job search, we're gonna get sanctioned. Sometimes, on a good day, I can apply for 16 to 32 jobs in a day. But then, on a bad day, you're lucky if I can do 4 or 5.*

Jasmine's job searching abilities were affected by her health problems, as she suffers with mental health issues, abdominal pain and a condition affecting her hormones, causing her to have '*bad days'*. However, discussed earlier, she believes the system does not cater for or support her health issues, and she must still fulfil the obligations set out in her Claimant Commitment, or risk being sanctioned. Speaking about the work-related conditionality and punitiveness which characterises the current benefits system, Christine (58, ESA & PIP) expressed:

> *I think it's horrible to make people... threaten people, you know, with like, you know, taking what little bit of money if they don't jump through hoops and take any old work, you know. I think that's wrong.*

As Lorraine (44, UC; awaiting PIP assessment) explained:

> *Alright, at the end of the day, if you want benefits, then you've got to look for work, but they're expecting you to… it's like me, I have got a phobia of noisy places, so if I don't take a job in the Asda, then I'll get sanctioned with me benefits and I am just like, that's not suitable for me, that job, and it's just like "well, we don't care", you know, they're forcing you to do things against your own will, but at the end of the day if you're on benefits then you've got to do it, otherwise you don't get benefits and you starve!*

This notion of being 'forced' to comply with work-related conditions against one's will due to the threat of destitution perfectly exemplifies what Grover (2019, p.335) terms 'violent proletarianisation', whereby austerity-driven welfare reforms coerce claimants, through threat of starvation, to commodify their 'labour power', thus exploiting and worsening socio-economic inequalities. The sanctions regime, which as described in chapter 3, has increased in scope and severity during the austerity era, is a core mechanism through which this work-related conditionality is enacted. As will be discussed in the following section, the continual

threat of sanctions causes distress and renders claimants powerless and, when imposed, their effects are devastating.

6.4.4 Sanctions

The experiences and accounts of the participants in relation to sanctions, whether threatened or imposed, add further weight to the existing body of evidence highlighting their egregious effects on claimants' lives and understandings of sanctions as a form of violence (Cooper and Whyte, 2017a; Mills, 2018; Grover, 2019; Wright *et al.*, 2020) intended to stigmatise and punish. The omnipresent threat of a sanction for perceived noncompliance with conditions acted as a continual hidden threat looming over the participants and caused perpetual anxiety. This was particularly apparent for those who were obliged to attend regular Jobcentre appointments. Jasmine (22, UC) had moved to a new area and began claiming Universal Credit and the perpetual threat of being sanctioned made her worry about getting lost or falling off her bike on her way to the *Jobcentre* and being sanctioned as a result. Her worries were exacerbated by her engagement with the *Jobcentre*, when she notified them that she was unable to attend her appointment because her mother was seriously unwell in hospital:

> *They said, that's fine, we'll take this now. But if you ring up again and rearrange any appointment or miss an appointment, then we will sanction you. But at that point you go on edge, you've got to make sure you're on time or early for every single appointment that they ask you to do, d'ya know what I mean?*

This evidence reinforces findings by Manji (2020) that the fear of being sanctioned impacts on all engagements with the Jobcentre, generating mistrust and worsening existing mental health issues.

Several participants had been affected by benefit sanctions when their partners were sanctioned. Dawn (36, UC) told me about when her partner was sanctioned while they were claiming Jobseeker's Allowance because he failed to attend a course that the Jobcentre had put him on, despite providing evidence:

> *I needed to go into hospital for an operation and he'd been placed on a course, but he had to take care of the kids while I was in having a minor procedure done. He took all the paperwork in that was needed [to verify his reason for non-attendance], but they still erm... disciplined him, and we lost*

> *6 weeks' money...because I needed an operation. So we tried to appeal but they said no ... so they sanctioned him 6 weeks' money.*

This experience illustrates the deep injustice of benefit sanctions and the relative powerlessness of claimants to fight against the system; despite them attempting to appeal this decision, Dawn and her partner were unsuccessful and lost six weeks' worth of money. Consequently, they were forced into debt just to afford basic subsistence. Moreover, this sanction was imposed around the time of Dawn's son's thirteenth birthday and caused additional financial and emotional strain. Natalie and her family were also affected by a benefit sanction when her husband quit his job due to being mistreated by his employer, which caused them to get into rent arrears.

Sanctions can therefore be understood as a powerful form of violence (Cooper and Whyte, 2017a; Mills, 2018; Grover, 2019) and a manifestation of institutional sigma. However, the 'bureaucratised face' and legitimate means by which the everyday '*institutional* violence' of austerity is imposed (Cooper and Whyte, 2017b, p.23), together with the often 'slow, deteriorative process' (p.24) by which it blights people's lives is often not recognised as such, making it in some ways all the more powerful, pervasive and insidious than interpersonal violence. This understanding of violence resonates with earlier theoretical accounts of how power and surveillance are exercised by modern institutions in bureaucratised forms that appear legitimate, but which exert psychological control over subjects which in some ways surpasses the violence imposed on bodies in traditional forms of social control such as the workhouse or panoptical prison (Pinker, 1970, 1971; Foucault, 1977). Though not all participants had been directly affected by sanctions, they were a topic that emerged in *all* the interviews I conducted, demonstrating the omnipresent threat they posed.

6.4.5 Forms of conditionality imposed on disabled claimants

6.4.5.1 Redrawing the boundaries of deservingness: The withdrawal and downgrading of support

As outlined in chapter 3, under austerity the boundaries of welfare deservingness have been redrawn so that disabled people have been pulled into the mechanisms of institutional stigma which characterises the benefits system as a whole. Legitimated by stigma and sensationalist portrayals of benefit fraudsters cheating the system, disabled people are subject to increasing conditionality and face more stringent demands to prove their eligibility through new

assessments and reassessments for existing claimants (Briant *et al.*, 2011; Ryan, 2019). This widespread change to the classification of disability within the British welfare system was influenced by the American healthcare insurance system (Stewart, 2016, 18a, 18b), and was a key element of the government's austerity agenda to save billions in welfare spending by cutting eligibility and therefore claimant numbers (Portes, 2015; Ryan, 2019; Hobson, 2020). The government outsourcing of the responsibility for overseeing disability assessments to private companies since 2010 is argued to distance the government from the harm that would ensue which demonstrates both an awareness of and the intentionality of such harm (Elward, 2016; Stewart, 2018a, 2018b). The core shifts saw the introduction of Employment and Support Allowance (ESA) from 2008 to replace Incapacity Benefit (IB), and the rollout of Personal Independence Payment (PIP) to replace Disability Living Allowance (DLA) from 2013 onwards. ESA claimants will eventually shift on to Universal Credit.

At the time of the fieldwork, five participants were claiming Employment and Support Allowance (ESA) and had been placed in the 'support group' following the Work Capabilty Assessment, meaning they were not expected to undertake work-related activities owing to their disability. However, one participant, Joanne, described her experience of applying for ESA when her health deteriorated:

> *That was terrible because barely 5 weeks after the open heart surgery, I had to go in for a medical interview at my local Jobcentre and the doctor assessed me for ESA, and after that I was told I was fit for work. I was really stressed about it. We did go to a solicitor about it I think or someone and legal aid was still available, so we went there. Luckily, I think it was three or so years later, we got the result we wanted, so I was able to claim ESA, but it was still so stressful.*

As discussed in chapter 3, one of the most radical reforms to disability benefits has been the transition of Disability Living Allowance (DLA) to Personal Independence Payment (PIP) and the introduction of a points-based assessment and mandatory reassessment for those already claiming DLA. This benefit was explicitly intended to save the government money by changing the boundaries of eligibility and making the benefit more difficult to claim than DLA, hence many disabled claimants had their support downgraded or denied (Daguerre and Etherington, 2014; Pring, 2017; Stewart, 2018b; Ryan, 2019; Gov.uk, 2021a).

The difficulty of claiming PIP was supported in my findings; of the eight participants that had applied for Personal Independence Payment (PIP), only one (Christine) had been successful in her claim. Joanne had her existing support downgraded on two occasions, four women (Amy, Michelle, Donna and Lucy) had been deemed ineligible for PIP following assessments or reassessments, despite being diagnosed with debilitating health conditions, and two (Sue and Lorraine) had applied or reapplied for PIP and were waiting to hear about assessments.

The process of being assessed for disability benefits was invariably described as a degrading, dehumanising and anxiety-inducing experience for the women I spoke to, leaving them feeling as if they are not trusted or valued, thus reflecting and contributing to stigma. Speaking of her experience of attending her assessment for PIP, Michelle (48, UC & unsuccessful PIP assessment), for instance, told me:

> *You feel like… I think when you go into these interviews, I did-you feel like they're better than you, and they're looking down their nose at you, sort of thing, you know?*

The participants' accounts of the assessment experience all mirrored this stark awareness of the unequal power dynamics between themselves and their assessor, where the stranger assessing them has the power to make life-changing decisions about them based on a snap-shot judgement. This stigma also manifested in being asked intrusive questions which involved repeating information already given in application forms as though they were being cross-examined. As Michelle put it, '*it felt like it was an interrogation*'.

She described how she felt following this experience:

> *I felt drained when I come out, I was like, I just wanna get home, I just wanna get in me house where I feel, like, safe, and then obviously she gives me that report and it's like... you've... you've gone... like the complete opposite of what I've said. You know, I've gone in there, I can speak, there's nothing wrong with me speech, and I can make eye contact… But, for her to say, basically, there was nothing wrong with you, you can drive, you can… You can walk for five minutes, you don't need help getting in the bath, you can make coffee, and… You know, I can't stand, I don't cook… I can't stand in the kitchen and prepare a meal like I used to be able to… It's just like... it's debilitating as well, it's like, you know, you're suffering with pain*

all the time.

Despite having undergone the draining, stigmatising experience of being assessed, the report Michelle was sent following the assessment showed a stark lack of understanding or empathy to the impacts of her health problems. Similarly, speaking about the assessment for PIP, Lucy (44, ESA & PIP), told me:

> *They might as well just sit you down and say, "you're lying", because they're awful …they don't agree with doctors' reports, they don't agree with specialists' reports, - the government think that they know better. They're not interested in finding out about you and your condition, because they've got targets to meet.*

This indicates the dehumanising, stigmatising nature of the disability assessment process coupled with an awareness of the intentional aim behind the recent disability benefit reforms to meet quotas and save the government money, reflecting existing research (Barr *et al.*, 2016; Ryan, 2019; Tyler, 2020).

Three participants, Joanne, Donna and Sue were affected by the switch from Disability Living Allowance (DLA) to Personal Independence Payment (PIP) and had to reapply for the new benefit and be reassessed using a new points-based system. Both Joanne and Donna had previously been granted DLA on an unconditional, lifelong basis owing to chronic health conditions but when they re-applied for PIP they both had their support downgraded or refused following assessment despite their conditions remaining unchanged or deteriorating in the time since they were awarded DLA. Donna (36, ESA & PIP) a mother of three children, who was diagnosed with Bipolar Disorder at the age of twelve explained:

> *I thought it'd be fine and that I'd just move over to PIP. But then I got a letter that said, basically - you had to score like points out of 12…I scored zero on all of them, I don't know how. But they said, no you can't have it. But I've got bipolar... it's just like, gonna be lifelong. Nothing's really changed for why I don't qualify for it anymore.*

Despite being diagnosed with a chronic mental health condition, according to the points-based system, Donna was not deemed eligible for PIP. The system for assessing eligibility was understood by many participants to be inappropriate for capturing the complexity and impact of their health conditions because the questions are skewed towards physical rather than mental

health conditions. This finding supports the recent High Court ruling that PIP is ‘blatantly discriminatory’ against people with mental health problems in that it treats people with mental health problems ‘less favourably’ than those with physical disabilities thus breaching several articles of the European Convention on Human Rights (British and Irish Legal Information Institute, 2017, clause 59; Bulman, 2017).

The lack of recognition of mental health issues in PIP assessments was also reflected by Michelle. In addition to her back problems, Michelle suffers with anxiety and depression but her PIP assessment report indicated that the assessor did not acknowledge her mental health difficulties:

> *Like and for her to say, well you don't have anxiety and you don't seem to be suffering with depression. You sat with me for two hours, love, you've not sat with me… You've not lived in my house for a week and seen what I'm like... crying constantly.*

Paradoxically, in dismissing her mental health problems, the outcome of the PIP assessment *added to* the mental distress Michelle was already suffering.

In addition to the material and emotional impacts of having support downgraded or denied following (re)assessment, the data revealed further significant implications of disability welfare reforms in terms of the dignity and independence afforded to the women I spoke to. This is particularly evident in the downgrading of support in the switch from Disability Living Allowance (DLA) to Personal Independence Payment (PIP) where between 2013 and 2018, an estimated 75,000 disabled people had their entitlement to join or access a claim from the Motability scheme removed (*BBC News*, 2017; Pring, 2018; Motability, 2018). This was the case for Joanne (35, ESA & PIP) who has a congenital heart condition impacting on her ability to live independently. While Joanne was able to go to university and live away from home in a nearby city when she was eighteen, since this time her health deteriorated and she was diagnosed with Chronic Fatigue Syndrome, became more reliant on her parents and moved home with them. Her car, which she was entitled to through DLA, was essential for her ability to retain some independence as it allowed her to travel to university where she is currently studying part-time for another degree. However, in 2016, with the switch to ESA and mandatory reassessment for existing DLA claimants, Joanne had her support downgraded and her entitlement to a car through the Motability scheme was denied. My findings therefore

reflect concerns that reforms to disability benefits result in the decimation of any fragment of independence that disabled people may gain from having access to a vehicle (Butler, 2013; Pring, 2018; Motability, 2018). This is of particular concern for the social inclusion and independence of those already living in poverty, who are less likely to have access to vehicle or be able to afford to use public transport (Gates *et al.*, 2019). Moreover, disabled women are disproportionately affected by welfare reforms impacting on their right to independence, owing to the intersection of disability with gender inequalities (Reis and De Henau, 2018).

Disability activists and academics in disability studies have long advocated the need for disabled people to be accepted as experts on their own impairments (Oliver, 1990; Barnes and Mercer, 1997, 2004). Nonetheless, as this section has revealed, disability benefit assessments give very little possibility of this, rendering disabled people as passive and powerless in the process of determining their eligibility. The imposition of conditionality for the disabled participants was invariably shown to be a source of immense stress, worry and worsening mental health, supporting existing evidence about the harms inflicted (Barr *et al.*, 2016; Mills, 2018; Dwyer *et al.*, 2020). Christine (58, ESA & PIP), for example, described how the toughening of conditionality during the New Labour government with the introduction of more stringent testing regime made her feel suicidal and as though she would be '*better off dead*'. This adds weight to evidence about benefit-related suicides as a result of welfare reform (Mills, 2018), as a form of 'social murder' (Grover, 2019). Many disabled participants also expressed concern about future assessments and the implications of the eventual switch to Universal Credit. The policy suggestions in light of these findings are later discussed in Chapter 8 (section 8.5).

6.4.5.2 Appealing decisions

Alongside the unprecedented wave of reforms to the design and administration of the benefits system since 2010, has been the introduction of additional barriers in the appeals process through which claimants can appeal decisions about their benefit entitlement including the removal of legal aid (Daguerre and Etherington, 2014; Ryan, 2019). Several of the disabled participants I spoke to had been through the appeals process following decisions to remove or downgrade their benefit entitlement after assessments, and their experiences suggest this is an onerous, draining process, confirming Daguerre and Etherington's (2014) concerns about the burden being placed on claimants, especially those with disabilities, to appeal decisions as an arguably intentional feature to deter them from doing so.

As outlined in the preceding section, when Joanne (35, ESA & PIP) was forced to reapply for PIP when it switched from DLA, she had her support downgraded so that she was no longer entitled to her car. The first time this happened, she successfully appealed this decision and remained eligible for the full entitlement, allowing her to keep her car, however when she was reassessed two years later, she had her support downgraded again despite her condition having worsened, but she did not have the energy to appeal a second time as the process was too draining. The time-consuming and difficult nature of benefit appeals was also highlighted by Michelle (48, ESA; unsuccessful PIP assessment), who was deemed ineligible for PIP following her assessment:

> *I've heard, if you appeal, you're more likely to get it, but it's like, they do that so maybe you don't appeal. Like I don't want to appeal, I can't be arsed, I can't- I don't wanna go and sit in that room again, and feel about that big [gesturing with fingers to indicate smallness]. Because some woman, who doesn't know me, is saying what she said about me.*

Having undergone the unpleasant and degrading assessment experience in the first place and been unsuccessful in claiming support for daily living, the notion of appealing and going through the experience again is unsurprisingly distasteful. Similarly, Lucy (44, ESA & PIP), who was denied PIP the first time she was assessed but later successfully appealed, commented:

> *It's usually the most vulnerable of people that lose out the most. They are the least likely to appeal if a decision goes against them. Because it grinds you down.*

Understanding the draining nature of appeals as an intentional feature to deter already unwell people from going through this process is supported by the finding by the Ministry of Justice (2019) that 75% of decisions for ESA and PIP were overturned at tribunals following appeals to initial decisions.

6.5 Conclusion

The chapter contributes to understandings of institutional stigma in the contemporary social security system, taking a holistic view by highlighting its embeddedness at every stage of the claiming process, and its multiple forms, from explicit manifestations in conditionality and sanctions, along with its more hidden presence in the administrative processes involved in applying for and claiming benefits and in the bureaucratic structure of the system.

Institutionally-embedded stigma has been shown to permeate every aspect of the system, from its design and accessibility, to the implementation of welfare policies and the forms of conditionality and punitiveness imposed. As shown, the contemporary benefits system is not only framed and legitimated by stigmatising assumptions, but it also inflicts such stigma onto vulnerable groups, adding weight to conceptions of austerity as form of violence (Cooper and Whyte, 2017b), disproportionately harming women and disabled people.

In terms of the system's design, the testimonies of the participants reveal the enduring power of deterrence as an effective stigma mechanism serving to dissuade potential claimants, and evoking reluctance and fear at the prospect of claiming. Just as this was an intention in the 19th century system of indoor relief in the workhouse (Page, 1984), deterrence is argued to be a deliberate and effective feature of today's system, seen in the arduous, degrading processes that claimants must undergo to apply. The data illuminates how these processes are experienced by women and disabled people, and the administrative barriers and difficulties involved, arguing that this again constitutes an intentional form of stigma. Moreover, the chapter adds weight to concerns about the rollout of the digital-by-default Universal Credit system and the risks it poses, especially to vulnerable groups and for women's financial autonomy.

In addition to stigma being embedded within the system's design, the chapter has revealed the evident stigma and degradation shaping the implementation of welfare policies. As discussed in chapter 3, the punitiveness and conditionality which characterise contemporary welfare policies are *legitimised by* stigma to make them appear fair and necessary. The findings contribute to this argument, while also contending that the enactment of such welfare policies *imposes* further stigma and degradation onto claimants. Hence, the data allows for a more holistic, multidimensional understanding of institutional stigma. The imposition of stigma in the system's implementation is discussed in terms of participants' perspectives on the Jobcentre environment and engagements with officials, the forms of conditionality imposed on claimants and the threat and impact of the sanctions regime. The stigma inherent within the new forms of conditionality imposed on disabled claimants are also powerfully demonstrated, as well as the harms they inflict on claimants' mental health and financial security. The chapter argues that welfare conditionality is an integral part of institutional stigma, because the very notion of conditionality is underpinned, justified and upheld by moral distinctions about deservingness. Moreover, efforts to prove deservingness entail further stigmatisation.

Overall, the findings presented in this chapter demonstrate the ubiquity of stigma as a pervasive, divisive form of power driving, legitimating and amplifying inequalities (Tyler, 2020). The stories of the women I interviewed all add considerable weight to the conceptualisation of stigma as a powerful 'machine' utilised to legitimise welfare retrenchment and reform (Tyler, 2020). The contemporary benefits system is argued to be a key vehicle for the continued production of stigma, targeting vulnerable groups. Complementing the discussions of institutional stigma in this chapter, the following chapter illuminates my findings in relation to the operation of stigma in everyday life and forms of resistance.

Chapter 7: Stigma and resistance in everyday life

7.1 Introduction

> *'From all these different angles, slowly people are picking and chipping and there's not much left of you. Like you get it from the Jobcentre. You get it from your assessments [for disability benefits], you're getting it from yourself… and so gradually, you just feel like you're a big puddle on the floor.' (Lucy, 44).*

As recent retheorisations of the concept suggest, stigma is a pervasive and violent form of structural power operating on multiple, intersecting levels to reproduce inequalities through the persistent devaluation of marginalised groups (Tyler, 2020). This thesis uses this theoretical lens to enable a critical exploration of the dynamics of stigma and resistance in the lives of women engaged with the social security system. The previous chapter examined the operation and impacts of stigmacraft on an institutional level in the design and implementation of the social security system, linking the unprecedented reform of the system in recent years to the stigma which legitimates such changes. In addition to its production on a broad, institutional level through political rhetoric, government policies and media discourses, stigma seeps into everyday attitudes and social interactions and contaminates self-perceptions.

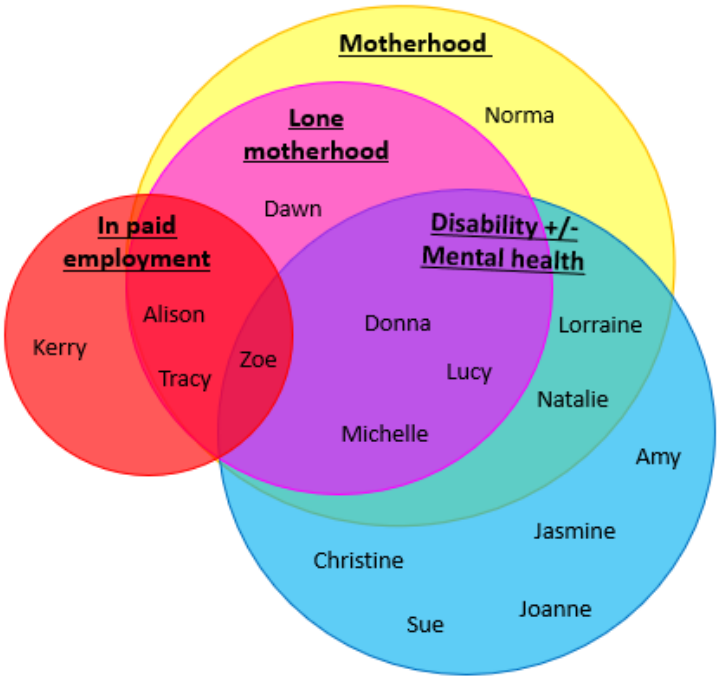
The multidimensional, pernicious power of stigma, both externally produced and internalised, works gradually, from different angles, to leave a person feeling depleted, broken and sapped of the ability to fight against it. This is exemplified perfectly in the quote above from Lucy, a disabled single mother. Using the testimonies of Lucy and fifteen other women who chose to share their stories with me, this chapter explores how stigma manifests on an everyday level through social encounters and self-identities, illuminating intersecting experiences of stigmatisation related to claiming benefits, motherhood, disability, mental health, social class and place. It will also contribute to knowledge about a crucial and under-researched area of stigma scholarship; how stigmatised people respond to and resist stigma. As I show, responses to stigma are not always straightforward and consistent but are complex and at times contradictory.

This chapter is structured into three main sections; living with stigma, resistance, and the contradictions and limitations of everyday stigma management. The first section looks at stigma thematically by examining different forms of stigma which manifest and intersect in the

participants' lives. It uncovers how the dominant stigmatising narrative about benefit claimants overlaps with other aspects of identity such as motherhood, disability, class position and place. The second section of the chapter discusses the various resistance strategies, both individually and collectively, that are employed by the women to counter persistent devaluation and stigma. The final section reflects on possible limitations to resistance owing to the power of stigma permeating lives and self-identities from multiple angles. This section therefore discusses the use of other stigma responses or coping mechanisms which occurred alongside the forms of resistance discussed in the previous section. Here it is argued that responses to stigma are complex and contradictory signifying neither a total acceptance nor complete disavowal of stigmatising ideas but a more ambivalent position.

7.2 The study participants

The diagram below shows an overview of the participants organised by various intersecting identities and experiences which will be discussed in this chapter in terms of their relationship to stigma. The circles indicate different identity categories; whether the women are mothers, whether they have experiences of lone parenthood, whether they have a diagnosed mental and/or physical health condition and whether they are in paid employment. The overlaps between the circles indicate where participants fit into multiple categories.



As indicated, ten of the women who participated were mothers, seven of whom were currently or previously single mothers. Ten women (including five of the mothers interviewed) explicitly discussed their mental and physical health conditions, with many participants experiencing multiple health issues. Owing to me accessing my participants via a charitable organisation offering counselling services all participants experienced some mental health concerns, such as low self-esteem, but the diagram above and the table below highlight those who explicitly referred to having diagnosed health issues. Four women were in paid employment at the time of the interviews. The following table provides further details about the participants to contextualise the discussion in this chapter.

Pseudonym	Age	Ethnicity	Current Benefit	Motherhood	Lone parenthood	Stated disability/ health impairment(s) (mental +/- physical)	Employment status
Donna	36	White British	ESA (& DLA for son)	Yes	Yes	Yes	Economically inactive
Lucy	44	White British	ESA & PIP	Yes	Yes	Yes	Economically inactive
Michelle	48	White British	UC	Yes	Yes, previously	Yes	Economically inactive
Natalie	31	White British	JSA	Yes		Yes	Economically inactive but undertaking voluntary work
Lorraine	44	White British	UC	Yes		Yes	Economically inactive
Dawn	36	White British	UC (& disability benefits for step-son)	Yes	Yes	No	Unemployed but currently exempt from job search obligations
Norma	77	White British	PC	Yes		No	Economically inactive
Christine	55	White British	ESA & PIP	No		Yes	Economically inactive
Sue	53	White British	ESA & PIP	No		Yes	Economically inactive
Joanne	35	White British	ESA & PIP	No		Yes	Economically inactive (student)
Jasmine	22	White British	UC	No		Yes	Unemployed & seeking work
Amy	23	White British	UC	No		Yes	Doing business scheme through DWP
Zoe	38	White British	UC	Yes	Yes, previously	Yes	Employed (phased return to full-time)
Tracy	41	White British	DLA for son & CA	Yes	Yes, previously	No	Employed (part-time)
Alison	50	White British	UC	Yes	Yes, previously	No	Employed (part-time)
Kerry	51	White British	Not currently claiming benefits	No		No	Employed (zero hours agency work)

7.3 Living with stigma

The accounts of stigma in this section demonstrate the pervasiveness of stigma in the women's lives, connected to different intersecting identity markers, and manifesting on several interconnected levels. Rather than distinguishing neatly between social and personal stigma (Baumberg, 2016), the everyday stigma experiences of the women I spoke to were difficult to disentangle and fit into this framework, therefore they are understood in a more holistic,

interconnected and nuanced way. As argued by Patrick (2017a, p.146), rather than being understood as discrete elements, the institutional, social and personal levels on which stigma operates can be understood as intersecting 'dimensions of an overarching experience of stigma'. As well as being applied to the stigma attached to claiming benefits, this conceptualisation can be applied to the other interrelated identity categories discussed in this section.

In this section, stigma operating on a social level is discussed both in terms of *direct* experiences of judgement from others, and the more *indirect*, but equally painful, perception or anticipation of such judgement both of which can manifest on a personal level and impact on self-perceptions. It firstly explores stigma related to benefits receipt and lack of engagement in paid employment and then examines how this persistent, overarching form of stigma overlaps with other aspects of identity, such as motherhood, disability, class position and place, to produce particular experiences of stigma. This section discusses these various forms of stigma operating on both a social and personal level to illuminate the interconnections between them.

7.31 Benefits stigma

The findings shed further light on the power and pervasiveness of the longstanding stigma attached to benefits receipt in Britain. An awareness of the dominant rhetoric, which positions claimants as idle, irresponsible and undeserving of benefits, was evident in virtually all of the interviews and manifested in various ways. All participants showed a recognition of the moral condemnation of claimants in society generally and some shared accounts of *direct* experiences of stigmatisation from other people in relation to benefit receipt. Moreover, the power and insidiousness of stigma was also apparent in the way many women talked about themselves and their status as benefit claimants, suggesting an internalisation of the dominant blaming discourse attached to poverty and welfare reliance.

The longstanding moral condemnation of benefit claimants was summarised by Tracy (41; CA & DLA for son; employed part-time), who claimed Income Support as a single mother of two young children, but now works part-time and claims Carer's Allowance and Disability Living Allowance for her Autistic son. She explained:

> *There's always that stigma - like if you're on benefits, you're not good.*

This statement echoes the persistent denigration of the so-called ‘undeserving poor’ as morally deficient and therefore to blame for their disadvantaged social position (Walker, 2014). Central to this was the notion of a perceived lack of deservingness due to a perceived absence of reciprocity (Baumberg *et al.*, 2012). In some cases, this dominant perspective manifested in accounts of direct hostility towards the women’s claiming status, as well as an awareness more generally of the way claimants have persistently been portrayed in popular discourses as undeserving and morally deficient. Tracy did not discuss any direct experiences of judgement from others, but her awareness of how others *may* perceive her still had a powerful impact on her self-perceptions.

The inherent class-based nature of the stigma attached to benefits receipt was described by Amy (23; UC):

> *I feel as though, having the title itself as being on benefits isn't...very...erm... I dunno... I don't think you get... you don't get like posh people on benefits, d'ya know what I mean? People who are like… upper class, don't have benefits - they have a very good job, very good cars and houses and stuff like that and... it's almost like, the people who are like very low class, working-class, have the benefits, and so, it's almost like... a bit embarrassing maybe... to tell someone "Oh, I've been on benefits for a few years now", sort of thing. I feel like that's embarrassing as well, and then, by saying that, it's almost as though you get categorised and put in the same... like...erm... I dunno, you get put in the same group as like... what people see going into the Jobcentre or the people loitering outside.*

Amy’s explanation of how claiming benefits makes her feel about herself exemplifies the divisive class dynamics at play in a liberal welfare regime like Britain where social security has come to be associated with something only reserved for the poorest, therefore residualised to a bare minimum and strongly associated with stigma (Esping-Andersen, 1990; Spicker, 1984; Mood, 2006; Walker, 2014). Furthermore, her embarrassment at being compared to and categorised along with other benefit claimants reflects Spicker’s observation that the British social security system becomes ‘tainted with the reputation’ of the people it serves due to their possession of ‘other stigmatising characteristics’ such as ‘poverty, immorality and physical and mental stigmas’ (Spicker, 1984, p.121).

Central to the dominant stigmatising discourse around poverty and welfare is the idea that benefits are undeserved owing to a lack of reciprocity on the part of claimants (Baumberg *et al.*, 2012) most commonly due to lack of engagement in paid work (Patrick, 2017a). The stigma associated with not working came across in many of the interviews. Jasmine (22), for instance explained:

> *Yes I've got consistent money coming all the time, but... if I look at my friends, they're all working, they're all pulling money in every month, and I'm sat there and I've got nothing, d'ya know what I mean, so, I do feel like the lesser of the kind, if that makes sense, like... working societies, higher up, and they get all the nice things, and obviously, I'm not allowed nice things because, obviously I'm not of working class, I didn't earn it, if that makes sense. I've been given it... I'm given this by the state... and that's how I see it. I'm being... they're giving me handouts, and like, in a sense, it's bad, 'cos like, I don't want to be like that, I don't want to be in the system.*

This quote powerfully illustrates the stigma manufactured in policy and media and discourses, and the power of stigmatising language such as 'handouts', which imply that benefits are undeserved. Furthermore, it shows the tendency for self-blame and self-stigma. Interestingly, Jasmine did not discuss any experiences of being directly judged by others in relation to claiming, but this awareness of stigmatising ideas was powerful and seeped into her self-identity. Her perception that she is '*not allowed nice things*' echoes popular stigmatising judgements about benefit claimants living a life of luxury at the expense of the hardworking taxpayer (Patrick, 2017a), showing the power of state-orchestrated narratives. The tendency of state-produced stigma to alter public perceptions of a stigmatised group and make their dehumanisation appear warranted is termed by Tyler (2020, p.28) as 'stigma-optics'. This statement exemplifies the painful exclusion faced by people on low incomes from the allure of the consumer society, where their privileged counterparts can engage in lavish consumerism, but they remain 'defective and disqualified' (Bauman, 2011, para. 1), or' 'flawed' consumers (Bauman, 1998), thus adding to stigma. Jarring with her apparent lack of deservingness of '*nice things*', Jasmine told me she can sometimes barely afford to buy basic items such as toilet paper or coffee, and described at length the painstaking work that goes into managing on such a low budget, for instance going to multiple shops to ensure she gets the cheapest price.

In addition to manifesting in many of the participants' own feelings about themselves, the powerful, state-produced stigma of claiming benefits also seeped into their social encounters. Speaking about old acquaintance, Norma (77), a mother of three, explained:

> *She always used to dig at me that I was claiming. I was... and I vowed that I would never. She wouldn't say your name, but… people who scrounged off the dole... didn't work and... you know, and that kind of thing… So I think in them terms as well, you think – "no, I'm proud, I'm not gonna ask anybody [for help], nobody's gonna say to me that I'm scrounger". Although, we have been, if you look at it in that way, we have been since 1980.*

Norma's account reveals the painful impact of stigma, where she was made to feel like a "scrounger" due to her family claiming benefits. This experience was reflective of the governmental 'stigmacraft' (Tyler, 2020, p.46) implemented by Thatcher and her government, in recasting blame for structural problem on to individuals (Levitas, 2005). Despite the *structural* causes of their situation, in which her husband was made redundant from his manufacturing job during a time of mass unemployment, the individualising, blaming, 'scrounger' discourse had, and still has, the power to permeate the way she thinks about herself and narrates her own experience. As Tyler (2020, p.225) notes, 'experiences of stigma can provoke a doubling of consciousness in which you see yourself through the eyes of others', thus further impacting on self-perceptions of unworthiness.

In addition to impacting on self-perceptions, this type of stigma was evidenced to influence perceptions of how other people view them. For instance, Norma (77), a mother of three, said:

> *People think because you're on benefits that... it's a stigma isn't it? "Oh, you don't wanna work, you don't wanna work", but everybody's not like that. But... you've all got the same stigma because you're on benefits - you get this and you do this and you can do that... and I think that's what gets me. It never goes away. It's never gone away.*

Norma's account powerfully exemplified the longevity and persistence of the stigma attached to poverty and benefits, where the defamatory mark of stigma still hangs over her and '*never goes away*'.

The stigma associated with benefits and unemployment also manifested directly in social interactions, for instance, Amy (23) explained:

> *I was in a relationship with this guy a few months ago, and he didn't like the idea... that fact that I was on benefits. He kept telling me I should go out and get a job, because, like, he's been working like his whole life since he was 14, and to him that was very respectable and everyone should be doing that and stuff, and, I kept saying how I've got my struggles and that it's hard for me to just do that, and he was just saying how it's just an excuse and that I should just like get over it and stuff* (Amy, 23).

Amy's experience of stigma from her ex-partner reflects the pervasive equation of paid work with respectability which dominates political rhetoric. Through this predominant logic, lack of engagement in paid work is, by default, associated with stigma. Furthermore, Amy was recently diagnosed with Autism and suffers with mental health problems including past experiences of psychosis, yet this stigmatising encounter demonstrates a dismissal of the impacts of her health conditions on her ability to engage in paid work, reflecting the stigma of disability and benefits receipt. The stigma attached to unemployment was also described by Lucy (44) who was dismissed from her job of nine years as a Jobcentre advisor owing to taking time off sick due to health problems while pregnant with her son. Speaking about societal attitudes she explained:

> *They put all the unemployed people into boxes...and I quite often… when I first started claiming... I've got better now, but when I first started claiming, I used to want to wear a sign that said "I have worked 25 years and paid my taxes" [laugh], you know because, you can see people and they're like, mm... [disapproving face] [laugh] and yeah, so...*

In addition to an acute awareness of negative societal attitudes towards unemployment and benefits receipt generally, Lucy experienced further stigmatisation and social isolation as a result of becoming unemployed:

> *Some of my friends, so to speak, erm obviously were colleagues from the Jobcentre. And, the minute you're unemployed, you lose all those friends... instantly, which, personally speaking, I wouldn't treat people like that, and I don't understand what's different, and I still have maybe one or two of those friends that will still be in touch, but every other word out of their mouth is about working.*

This demonstrates how the stigma of unemployment and benefits receipt links to social exclusion. Moreover, Donna (36), who had been out of work for sixteen years due to suffering with bipolar disorder and bringing up three children, highlighted the cumulative effect of long-term unemployment on the prospect of future employment owing to stigma;

> *There's like a stigma as well- if you were to go and look for work (inhale), they're gonna say, well... why haven't you worked for sixteen years?*

Furthermore, despite having never experienced direct hostility from others as a result of claiming benefits, Christine (58) described feeling like '*a big fat scrounger', 'a big waste of space'* and *'a burden on the state'* as a result of the increasing punitiveness and conditionality for disabled benefit claimants in recent decades. This exemplifies the powerful interconnection between state-orchestrated, institutional stigma, and the stigma that is felt painfully on a personal level.

7.32 Stigma and motherhood

7.32.1 The devaluation of care

Caring responsibilities shaped many of the participants' benefit claiming trajectories and constrained their opportunities for paid employment, reflecting Lewis' (1997) observation about the deeply gendered relationships between welfare, work and care. Moreover, when coupled with poverty and benefits receipt, the stigma experienced by the mothers of the study took a unique form. Stigma manifested in the accounts of all the mothers interviewed both explicitly through direct experiences of stigmatisation and more implicitly in the anticipation or suspicion of social disapproval. Like the stigma identified by Baumberg *et al.* (2012) in their study of benefits stigma, the stigma experienced by mothers centred on the notion that they are undeserving of benefits due to a lack of reciprocity and a devaluation of their caring and domestic labour which remained unrecognised as work.

The notion that mothers and caregivers who rely on social security benefits do not *earn* or *deserve* the financial assistance they receive reflects the undervalued nature of social reproduction; this 'life-making work' (Bhattacharya, 2020) is naturalised as something performed out of love and care within the private sphere rather than a vital form of *work* aiding the reproduction of the capitalist economy (Wilson, 1977). The taken-for-granted nature of care was reflected by Christine (58), who took care of her father and, later, her chronically ill partner. She provided this care while claiming Carer's Allowance but also continued to do so

unofficially for no pay, describing this as something '*which you just do, don't you, you know, if it's your family, or your partner or something…if you love someone'*. Consequently, caring and domestic labour within the home remain unrecognised as work (Oakley, 1974; Hakim, 1980) and are therefore undervalued and unpaid

This persistent devaluation of caring and domestic work was demonstrated by Natalie (31), a mother of four including a son with Autism. Natalie's account revealed experiences of being judged and criticised by her husband's parents about her not being engaged in paid employment:

> *They told me…we'll always be disappointed in you for not having a job…there'll always be that resentment, as long as I don't have a job…Because they think I'm lazy; just this lazy mother…bad mother.*

Assumptions of 'bad' motherhood have long been tied to benefit dependency (Roseneil and Mann, 1996), and this judgement of laziness stemming from lack of engagement in formal employment reflects the deep devaluation of caring labour. Despite the essential work Natalie provides in taking care of her four children, this remains unrecognised and invisible. In the interview, Natalie talked about the value she placed on being a good mother, the hidden, hard work involved in taking care of her four young children and the additional demands and costs, financially, emotionally and in terms of her time, of taking care of her disabled son.

Not only did her parents-in-law express judgement at her not being engaged in paid work but they criticised her for not doing 'enough' work around the house and leaving such work for her husband to undertake. This experience may be a partial reflection of traditional gendered ideas about domestic roles, stemming from the male breadwinner-female homemaker family model constructed with the rise of industrial capitalism and central to the creation of the welfare state (Wilson, 1977; Fraser, 1994). It also demonstrates a stark ignorance of her long-term mental health struggles which constrain her ability to engage in paid work and undertake domestic duties. Such experiences of stigmatisation reflect and reinforce the divisive logic in the discourse around benefits where claimants are pitted against the 'hardworking' majority, negating the value of equally essential forms of work (Patrick, 2017a, Shildrick, 2018). Furthermore, this experience of stigmatisation reveals the gendered moral standards that working-class mothers have long been subject to. The notion of 'bad' motherhood tied to the perceived inability to manage her home to a high standard reflects the responsibility placed on

mothers for maintaining ‘respectability’ and managing class stigma in working-class communities (Skeggs, 1997; Shildrick and MacDonald, 2013; Hamilton, 2012) where household cleanliness has long represented a visible signifier of good motherhood (Skeggs, 1997).

7.32.2 “Benefit mums” and single motherhood

The accounts of stigma discussed by the ten mothers all drew upon stigmatising tropes of mothers having children to avoid formal employment and maximise benefit entitlement (Roseneil and Mann, 1996; Evans, 2016; Griffiths, 2017). All the mothers demonstrated an awareness of such stereotypes, with Natalie (31) commenting:

> *I have four kids, and to most people, that'll probably look like, “oh she's just done that, 'cos she's just like trynna get more money out of the benefits system”, because of all these people coming out [on reality television and tabloid articles] like, “I'll just have kids just to have money”.*

Natalie’s account highlights the detrimental impact of stigmatising media portrayals on her outlook of how other people perceive her, demonstrating the insidiousness of classed and gendered stigma in the contemporary era. Such representations cast doubt on her mothering abilities and her motivations for having children, causing Natalie to reassure me of her love for her children. Hence, again, stigma was strongly associated with the notion of being an inadequate mother.

In some cases, this pervasive gendered discourse bled into everyday interactions. For instance, Dawn (36), a single parent who has four children and is the primary caregiver for her disabled step-son recounted her experience of derogatory remarks from her step-son’s mother:

> *She basically accused me of using her son as a means to avoid getting a job.*

This accusation echoes popular media representations of ‘benefit mothers’ where ‘the mere presence of children has become suggestive of fecklessness and a reason for the avoidance of paid work’ (Evans, 2016, p.441). Reflecting the longstanding denigration of single mothers who claim benefits (Roseneil and Mann, 1994; Tyler, 2013; Evans, 2016; Carroll, 2017) detailed in the previous chapter, this moral condemnation was amplified among the lone parents interviewed. In these cases, single motherhood was emphasised as carrying a distinctive form of classed and gendered stigma. This was summarised by Lucy (44) a disabled lone mother of one:

> *It comes with its own stigma, doesn't it? People make assumptions about you as a person, they make assumptions about your intelligence and about what you should or shouldn't be doing as a person, and you're fighting two parent's battles in terms of bringing up the child as well- you're being mum and dad- and it's tough sometimes.*

For Lucy, the stigmatisation of single motherhood was compounded by the practical and material challenges of bringing up a child on a low income and without the additional support of a partner or family members able to help with childcare. The multidimensional difficulties faced by single mothers reliant on benefits was also reflected by Tracy (41):

> *I hated being on benefits when the kids were younger, but I was on my own and I couldn't do anything else… [I hated it] just cos… well the stigma of being on benefits. Plus, I was struggling. It's like, it was nice that, yeah, I was with my kids all the time, but then I couldn't do anything with my kids, cos I didn't have the money to do anything.*

In response to the stigma and financial difficulty of her situation, Tracy found employment in hospitality, however this was not financially viable owing having to shoulder the costs of childcare singlehandedly while also denying her quality time with her young children. This exemplified what Duncan and Edwards (1999, p.2) call ‘gendered moral rationalities’, which are the constrained choices that women, particularly working-class women, must make, for instance about whether or not to undertake paid work, weighing up pressures to be good mothers alongside pressures to earn and income and be deemed hardworking.

One participant, Alison (50), experienced a sudden transition from being married and financially comfortable to being a single mother and claiming benefits after her marriage broke down:

> *My first husband, he did have a very good job, we had a lovely house, two holidays abroad a year, the kids didn't want for anything, and then it was all just gone overnight… my life changed completely, as in, you know like, no husband, and moved from a lovely house to a little rented house... So to go from being like that, to then scrimping and saving, and going round Aldi and counting every penny cause you've only got ten pounds in your purse and you've gotta feed the kids for a week, and mentally going round and*

adding up, whereas before I would've just gone to Tesco's and filled the trolley and not thought about it, you know what I mean?

Compounding and intersecting with the financial difficulty of being a single parent claiming benefits, social isolation was also a shared theme across the single mothers in the participant group, reflecting findings from previous research (Marsden, 1969; Rowlingson and McKay, 2002; Carroll, 2017). This was particularly stark in Alison's account of her transition to being a lone parent claiming benefits, and the way that this affected other people's attitudes towards her:

People's opinions changed and people that I thought were friends weren't, and they just didn't wanna know...dropped you like a hot potato... the kids weren't invited to parties, people would cross over the street… So the social group that you had all of a sudden don't want to know you. And they didn't let their kids play with my kids and things like that.

Alison's experience mirrored Rowlingson and McKay's (2002) finding that middle-class women residing in localities dominated by two-parent families tend to face social rejection and isolation when they become lone mothers. Moreover, Alison's transition to single motherhood also impacted on her own self-perceptions. She explained that while at night school a couple of years after becoming a single mother, she learned about Maslow's triangle of human needs and it suddenly dawned on her that she was barely able to provide the very basic needs for her two children. She explained:

I was just sat there and I burst into tears and I was like, oh my God, I thought, that is my life- I have gone from like up here on the triangle [gesturing with her hand], to like rock bottom.

The lack of financial stability was a core theme in shaping the stigma experienced by the mothers in the study, particularly the single mothers, owing to the importance placed on being able to provide for their children's needs. This pain and stigma was discussed by Tracy (44):

You're in the school playground and you've got the working parents who are giving expensive gifts for people for kids' parties and then you go and you just...yeah... don't give much in a card or something... yeah. You feel like this big [gesturing with hand to indicate smallness] don't you like... tiny.

In response to the stigma of being labelled inadequate mothers for not providing for their children, and perhaps to protect their children from poverty stigma, all the mothers discussed considerable self-sacrifice to ensure such needs were met, including falling into debt, especially around birthdays and Christmas (Shildrick *et al.*, 2012), borrowing money or accepting food from family members and using food banks and social supermarkets.

While *not* being able to afford to buy things for their children due to living on a low income was a significant source of stigma, Donna's account revealed that stigma can simultaneously operate in relation to judgements about mothers' spending habits. Describing a conversation she had with a woman at a community-run social supermarket about her daughter attending dancing lessons, she explained:

> *She's like – "but you don't work, you can't afford to send her dancing…if you have to come here to buy your shopping, she shouldn't be going dancing" (Donna, 36)*

Donna's experience reflects popular stigmatising discourses about the lifestyle choices and consumption habits of benefit recipients where the possession of so-called "luxury" items denotes a lack of 'genuine need' and therefore a lack of deservingness (Baumberg *et al.*, 2012, p.24). Such arguments have been mobilised persistently to support claims that the benefits system is overgenerous and vulnerable to exploitation, which was exemplified in the mythical figures of the 1970s "Welfare Queen" (Hancock, 2004; Allen *et al.*, 2015) and '"chav mum"' (Tyler 2008) more recently. Donna's attempt to protect her daughter from poverty stigma by ensuring she is not excluded from activities enjoyed by her peers paradoxically attracts stigmatising judgements, echoing Hamilton's (2012) findings with low-income mothers whereby purchasing branded clothing for their children attracted further stigma. This account, alongside the accounts of mothers feeling stigma due to *not* being able to afford to buy things for their children, reveals the catch-22 situation that low-income mothers find themselves in; where they *can* afford to pay for something for their children this is taken as evidence of irresponsible choices, funded by an overgenerous welfare system; where they cannot, this is strongly associated with stigma and associations of inadequacy as mothers.

7.33 Stigma and disability

As outlined in the previous chapter (and in chapter 3), owing to the redrawing of the boundaries of deservingness in recent years, disabled people have, under austerity, been drawn into the

stigma machine and subject to increasing scrutiny and stigma (Tyler, 2020). Stigma has been used to justify an increasingly punitive stance towards disabled claimants who have had their security stripped away as they have been forced to re-apply for benefits and undergo (re)assessments to have their eligibility scrutinised (Ryan, 2019). Meanwhile, disabled claimants are portrayed persistently in popular discourse as undeserving and fraudulent (Briant *et al.*, 2011; Ryan, 2019). For some disabled participants, the state-produced stigma imposed on claimants intersected with and amplified existing stigma associated with disability.

The stigma of disability was clearly evident among participants with long-term or degenerative conditions that worsen over time. Sue (53), for instance, was born with Spina Bifida, and told me about experiences of bullying at school because of her disability. Owing to a deterioration in her mobility, she began using a wheelchair, something she has desperately fought to avoid despite considerable mobility difficulties. To her, the wheelchair symbolised a visible marker of difference, a 'stigma symbol' (Goffman, 1963), indicating a lack of dignity and independence. Sue's reluctance to use a wheelchair could be seen to reflect the disabling barriers in society according to social model of disability (Oliver, 1990). This was mirrored by Lucy (44) who, despite her deteriorating mobility owing to her rheumatological condition, explained:

> *Technically, I should be in a wheelchair, but I'm going "no", and defying that because it's... that's a mental thing that I... I don't want to go in a wheelchair. However, I also know from the flip side of things that I'm dragging myself round on those [specialist crutches], wearing myself out, because of a stigma again, that I don't want to be in a wheelchair. And it's ridiculous, because, if I did… I have hired scooters and I have used wheelchairs, and when I do, I feel slightly more well, because I'm not draining myself trying to pull myself round on sticks.*

So, despite crutches being a more physically demanding option, she is resistant to using a wheelchair because of the associated stigma. Lucy also must wear specialist shoes, which along with the specialist crutches, incur considerable extra costs which her benefits barely meet.

Lucy is unable to work due to her deteriorating condition and, in addition to having the legitimacy of her claim scrutinised and denied by the benefits system, having her support withdrawn and having to undergo humiliating, dehumanising assessments to prove her

deservingness, she described the stigmatisation she faces during interactions with her friends - ex-colleagues from the *Jobcentre*:

> *I quite regularly get, "ooh, you're walking well today", erm "you're walking better", you know, "if you lose weight, you could get yourself a job, you know, you'll be able to move better".*

Lucy's experience of her ex-colleagues making comments on her mobility reflects dominant stigmatising narratives about benefit claimants who exaggerate their health conditions as a means of avoiding paid work (Ryan, 2019). Moreover, their suggestions that her chronic, painful and debilitating health problems could be resolved merely through lifestyle changes indicate the victim-blaming, pathologising notion that her condition is somehow self-inflicted and a result of poor lifestyle choices. This disability-related stigma resonates with the stigma attached to claiming benefits and demonstrates the intersection of these forms of stigma in the lives of disabled people reliant on social security benefits.

Being made to feel as if illnesses and disabilities are exaggerated was further illustrated in the accounts of participants with mental ill health owing to the often-hidden nature of such problems. Michelle (48), for instance, told me:

> *Somebody said to me yesterday, "you look great". I might look a bit better in my face, but that doesn't mean that I'm not suffering on the inside, do you know what I mean?*

This experience of Michelle's mental health struggles being dismissed owing to them not always being outwardly apparent intersected with Michelle's experience of being assessed for PIP, discussed in the previous chapter, whereby the assessor did not believe she *looked* anxious or depressed, and therefore did not believe that her mental health problems were legitimate. Together, such experiences contributed to stigma and low self-worth and supports findings that the disability benefit assessment process negatively impacts on claimants' mental health (Barr *et al.*, 2016; Dwyer *et al.*, 2020).

A similar feeling of stigma emerged in Zoe's account of not feeling as if her mental health problems were recognised by other people. Zoe (38) had been diagnosed with Post-Traumatic Stress Disorder following her experiences of being assaulted, drugged and raped by her ex-partner. She told me:

> *It has been a challenge obviously having to go and speak to people in the benefits [the Jobcentre], and having to speak to speak to people… people who are being judgmental, and from my work, who are like "just work, you look fine" [laugh]…"you obviously look like you've brushed your hair and done your nails, you can't be that depressed", but they don't know what's going on inside you, d'you know what I mean? So it is really difficult.*

This again demonstrates the stigma of mental health; because the illness is not easily discernible it is not perceived as a legitimate reason for not working. This form of stigma was compounded by the victim-blaming attitudes Zoe faced from the police during the investigation with her ex-partner, as well as her son, for taking back her ex-partner who then continued to abuse her.

Moreover, disability stigma was revealed to impact on participants' sense of self-worth:

> *It's all little comments like that that slowly chip away... And these are people that you know and are supposed to care about you [laugh], so if they're saying things like that, other people are thinking, or you feel that they're thinking, much worse, don't you? As time goes on, I know… my condition's degenerative so it's not gonna get any better.' (Lucy, 44).*

Experiences of social isolation were also very common among the participant group, particularly those with chronic illnesses and disabilities. Lucy, for instance, explained:

> *You become isolated. Socially isolated. Friends disappear. I lose friends because I'm ill. And not because I'm unemployed and ill, but because you can't go to the pub the same anymore, because I'm on quite a lot of medication which doesn't work with alcohol. So then, friends that you used to go to the pub with will go, "ooh you don't come out anymore". Or, you know, if we go anywhere, I'm always trailing behind people because I can't walk as quick as people… You lose people, bit by bit, just through the natural progression of something you've got no control over.*

This experience demonstrates multidimensional impacts of stigma where different forms of stigma intersect and lead to further stigmatisation, weakening social and community ties and opportunities for resistance (Tyler, 2020).

7.34 Class position and place

Another important form of stigma emerged related to class position and place. Some participants explicitly referred to being working-class and growing up with financial hardship as a persistent feature in their lives. One participant, Tracy (41), discussed the positive power of place and working-class community ties in fostering a sense of belonging, mirroring findings by McKenzie (2015) about the role of community in protecting against class stigma in stigmatised localities. While she acknowledged the moral denigration of benefit claimants in society more generally, she explained that within the community where she lived as a single mother claiming Income Support, this sense of stigma was not apparent:

> *Not around where I lived on my estate cos it was... it was a council estate anyway. You felt... I felt comfortable with my own crowd at the time like. A lot of people was on benefits themselves. That sense of community… there was like... people would always be coming borrowing or you'd borrow off them because you're all in the same boat so… Yeah and like everybody does come together like, if it was like Halloween or Christmas, like, somebody would have a party in their house, and everybody'd just bring something, so that's how it was done. There'd be no pressure. So that's like the good things, like the community when you're on benefits.*

However, despite the positive role of collective solidarity within some working-class neighbourhoods in helping residents cope with and resist externally-imposed stigma, such community bonds are argued to be weaking and becoming more fragmented under neoliberalism (Wacquant, 2008) owing to the power of stigma (Tyler, 2020). Moreover, strong ties *within* a working-class community do not protect residents from the powerful stigma imposed from above and outside, as illustrated by Donna's experience. Telling me about the area where she grew up, she said:

> *I've always lived like there… it's always been like a rough area anyway. Cos there's a stigma isn't there about [place name omitted]? [People think] they're all... like on benefits and... bums and... scavengers and all that - we used to get called all sorts… [by] other people who don't know about the area. Like I went to school at [school name omitted], and me friends weren't even allowed to come to me house because I lived in [place name omitted]. (Donna, 36)*

This account demonstrates the power and persistence of the symbolic, place-based stigma commonly imposed on deprived localities and those who reside there (Hastings, 2004; Wacquant, 2007, 2008, 2009; Hancock and Mooney, 2012a; McKenzie, 2015; Slater, 2015). The process by which marginalised places and their residents become stigmatised has been termed 'territorial stigmatisation' (Wacquant, 2007), combining Bourdieu's (1991) understanding of symbolic power and Goffman's (1963) concept of stigma. Donna's story powerfully revealed the pain and exclusion that came from being tainted by the reputation of the area where she lived, where the parents of her middle-class school friends made moral assumptions about her and her community based on the longstanding, externally-imposed spatial stigma.

Furthermore, Donna went on to describe a particularly humiliating experience of this form of stigmatisation in front of her classmates while at secondary school. She attended a grammar school where most of her classmates were '*quite posh*' and resided in more affluent areas than her. She told me:

> *We had this one teacher at school, and she actually stood up in front of the whole... I don't think she realised where I lived, and she stood up in front of the whole class and said, "would your parents let you date a boy from them three roads behind [well known supermarket]. you know, the rough area. And that's where I was living at the time. I just ran out the class crying.*

This experience contributes towards understandings of the defamation of particular places and the consequences this has for the identities of the residents of such places. The stigma attached to places and their residents was further demonstrated in Amy's account. Amy (23) grew up in a different area of the same post-industrial town as Donna but disassociated with the town owing to its stigma. She said:

> *I like the area, it's just, I feel as though, me- I don't fit with the area. Some of them [her family] act like you'd think someone from [town name omitted] would act, they're like rough and scallyish and... they may take drugs, or they talk in a certain way and... they're rough, and then there's some people who you wouldn't think they're from [town name omitted] because they're together, they're respectable, they dress well, they act well, they... you know, they have a good job or they have good cars, or... they earn a certain amount of money, or... they just act posher or something like that- like I'd say about*

> *seventy percent of my family are like that, including me, and so I don't, I mean I can't call us higher class because we're not... by...erm... like literally, we're not. There's nothing that says we are- we're not. But we, almost like... just have...that's just have just how we have been brought up, and we act that way and... Like I went to high school, and everyone in high school thought I was a very posh person. Because, everyone... 'cos people would be like... having a very rough like scouse accent or something, or... they'd be... dirtier, or something… We don't really talk with a really scouse accent, or we don't dress scallyish, like none of us at all do, and none of us are like... take drugs or anything like that.*

Amy's account demonstrates the power of territorial stigma in determining the reputation of a town and its residents and her acceptance of the narrative that people from the town are 'rough', 'dirty', 'scallyish' and drug dependent. She seeks to distance herself from such a reputation illustrating the power of divisive stigma politics in increasingly unequal, neoliberal capitalist societies; under such conditions, people are encouraged to judge and blame others which fragments and weakens collective class solidarity and allows stigma power to conquer (Link and Phelan, 2001; Wacquant, 2008; Tyler, 2020). This divisive logic links to and feeds into 'othering' responses to stigma, which will be discussed in section 7.5.1 but, first, resistance strategies will be discussed.

7.4 Resisting and rejecting stigma

Rather than merely being straightforwardly imposed from above, stigma is understood as site of persistent struggle and resistance (Link and Phelan, 2001; Tyler, 2020). This was evident in the accounts of the women interviewed where, in the face of continual stigmatisation on multiple levels, they rejected stigma in various ways. This section of the chapter discusses the resistance strategies, both individual and collective, employed by the women to counter persistent devaluation and stigma. Individual forms of resistance manifested in the desire to legitimise their own identities with other markers of value, status and deservingness such as the recognition of care as work and expressions of pride in being good mothers. Resistance was also demonstrated by the rejection of individualising discourses, the acknowledgement of stigma as structurally-produced, and expressions of strength and resilience. Moreover, the role of collective resistance and community support is also discussed.

7.41 Recognising the *work* of care

One means through which stigma was refuted was through the recognition of the value and hard work of caring for children, as reflected by Donna (36):

> *If I had the choice I would be at work, but it's like having a full-time job anyway when you're a single mum. That's a job where you can't just leave at five o'clock, so it's like a twenty-four hour one!*

This comparison between unpaid care and paid employment asserts the status of care as a valid form of work and thus shows resistance to dominant portrayals of mothers who claim benefits as passive and undeserving. In particular it counters the stigmatisation faced by single mothers. This was reinforced by Lucy, another disabled single mother. She observed that:

> *If they paid a mum for all the roles that they do… Mums would be on like £100,000 a year, for all of the... going to parents' evenings, school drop-offs…organising lunches… you know, but it's not a paid role and it's just taken for granted really, isn't it? (Lucy, 44)*

This illustrates resistance to the economic and social devaluation of unpaid caring labour and recognition of the deservingness of mothers to financial remuneration for their role, which is denied by the current social security system. The ability of the mothers to reject the dominant ideology imposed on them about their value and instead rearticulate 'value' in their own alternative terms as a means of resistance reflects the work of Skeggs (1997, 2011). Like the women in Skeggs' (1997) ethnographic research, the mothers I interviewed saw value in being able to spend more time with their children unlike middle-class mothers in full-time employment. For instance, Tracy (41), a single mother of two young children at the time, transitioned from benefits into employment but found that in addition to it not being financially viable it denied her of quality time with her children.

Countering gendered stigma also manifested in expressions of joy and pride associated with motherhood, reflecting findings from existing research (Shildrick and MacDonald, 2013; Carroll, 2017). Indeed, mirroring findings by Carroll (2017), many of the mothers rejected negative stereotypes and believed themselves to be good mothers. Norma (77), for instance, discussed the importance she has always placed prioritising her children's needs despite considerable financial hardship. She explained:

> *I can remember when computers first come out... a Sinclair... a*

> *little Sinclair computer... and my son... our [son's name] was 9, and that's all he wanted was this Sinclair computer- that was one week's money to us, but he got it... he got it. He got it. Well, that's what his job is now. He's what... he's 46, and that's what he is isn't he? [Little laugh]*

Being able to buy her son a computer for his birthday was a source of pride especially in view of his subsequent employment in I.T. Even today, she explained how she still prioritises her children and grandchildren:

> *Birthdays and Christmases, it's the kids' time. Even now, it's the kids' time…the small kids now, the grandkids now... but even... even when it's my three's birthdays, I wouldn't, even if I can only afford... flowers to send to me daughter... even though we've got no money, I would rather do without to give... still nowadays, to give to them, to give to them.*

The other mothers also expressed pride and enjoyment at being good mothers, responding to and countering the persistent stigmatisation of mothers who claim benefits. Dawn, for instance, talked proudly about having well-rounded children and about being able to make her step-son laugh. Similarly, Lucy discussed the joy she feels when she sees her son smile.

Moreover, the mothers in the study showed resistance to stigma relating to their spending habits; for example, Donna (36) responded to judgements about sending her daughter dancing by commenting:

> *I don't feel, just because I'm on benefits, that me kids should miss out. You can't just turn round and say to your kids, oh, you can't go 'cos I don't work… she's not going abroad every month, it's just a dance lesson once a week.*

Donna directly refuted the stigma she faced by asserting her daughter's right to not be excluded due to them living on a low income. Asserting the importance of their role as mothers, and their pride at putting their children first, demonstrates resistance to the persistent denigration of mothers who claim benefits as irresponsible, bad mothers (Roseneil and Mann, 1996; Evans, 2016), though, as will be discussed further in section 7.5.2, this may entail a considerable degree of self-sacrifice and be a source of further stigma.

7.42 The rejection of behavioural discourses and the acknowledgement of structural inequalities

In opposition to stigma, many of the women actively rejected stigmatising, behavioural discourses so frequently used to explain poverty and reliance on social security benefits, reflecting findings from Pemberton *et al*. (2016). Speaking about her family circumstances of claiming unemployment benefits when her husband was made redundant, Norma (77) explained:

> *There shouldn't be that stigma, because it's not your fault... it wasn't our fault.*

Though, as discussed earlier, Norma experienced negative attitudes from others about claiming benefits and internalised some of these ideas, this quote demonstrates resistance to powerful narratives of personal blame. Similarly, Lucy observed:

> *It's not a choice, it's not something I've wished upon myself [laughing]…I think it [the perception that benefits are a lifestyle choice] stinks- Who would choose… who would... who in their right mind would choose to be...degraded, demoralised, judged, skint [laugh… struggling, panicking from day-to-day whether you're gonna be able to feed your family, you know, who would choose that?*

Similarly, Christine (58) explained:

> *I didn't just wake up one day and say I'm gonna be on the dole, that's a great idea, yeah, just get money for nothing forever! But it's not much, is it, you know, most of the time… all me life - all me life, I've just been living on, you know, you go for most of the week without anything, and then you pay your bills, and all those things you've gotta have, your eleccy, your food, and your cat food or whatever, and... you know, essentials, and... that's if you can pay for them, and then it's like... it was like, er, you know, I used to go, a lot of the time you know, just go out and buy loads of food on payday, all cheap stuff too... like potatoes every day, chips every day [laugh], and you think about it, ohhh, yeah I've done that for... urghh... half me life!*

These acknowledgements of the structural barriers and hardships associated with claiming benefits directly counters the stigmatising notion that benefits are a lifestyle choice. Moreover,

many of the women recognised that the people judging and stigmatising them are often oblivious and ignorant to such difficulties. For instance, Norma (77), who experienced stigmatisation from an old acquaintance who often openly criticised '*people who scrounged off the dole*', commented:

> *But she'd never been in that situation, so she didn't know that you'd give the children a jam butty and you'd have a piece of dry bread.*

In opposition to individualising, victim-blaming narratives, many participants instead demonstrated a sophisticated understanding of the mechanisms of stigma, expertise only truly acquired through direct experience at the receiving end of such interventions. Christine (58), who had been claiming benefits for over three decades due to chronic health issues, described the amplification of stigma under austerity in the last decade:

> *All the time on the news it was like, oh it's gonna go on, this depression, and there's no sign of an end… I stopped listening to the news altogether, because it used to make me sick. I thought, "this is us" [people on benefits… you know, it was all about, you know, the government's money… spending and that, and they just didn't want to give it away, you know what I mean, because they didn't have it… saying that people were gonna have to find other ways to look after themselves, and only the people who were really ill could have money, you know? And people had to take any job that would come along or they'd just have to die, kind of thing! It was just like being alive in a place where they couldn't afford to keep you, and you're thinking all the time... you just wish you were dead all the time with the stress of it.*

Christine's account poignantly reveals the devastating power of governmental 'stigmacraft' (Tyler, 2020, p.89) in the wake of the 2007/8 financial crisis, in delineating the boundaries of deservingness and cast blame on to those reliant on state support to justify unprecedented cuts to public expenditure. Her sense of a palpable shift in public and political discourse around benefits during her time of claiming benefits demonstrates the wider structural forces at play in mediating her everyday experiences.

This awareness was reflected by other participants. For example, Lucy (44) explained her belief that judgmental attitudes about benefit claimants are '*fed down from government*' and that:

> *To me, the climate at the moment is to make rich people richer and poor*

> *people poorer, and they're trying to put a divide, and people might say that that's... People might say that that's a bit far-fetched, but, if you've got any ounce of intelligence, you can see... that's what's happening in society… You know, you've got... people driving round in huge, big cars that cost more than my house, and then you've got people on the other flip side of the coin, who can't feed themselves…. And to me, personally, that's just such a huge extreme, isn't it, you know?… Can we not balance it out in some way?*

Along with many other participants, Lucy was acutely aware of the polarising socio-economic inequalities at play in austerity Britain where historically-ingrained, victim-blaming attitudes about the poorest in society are deliberately '*fed down'* from those at the top to obfuscate the real causes of poverty and inequality and to prevent challenges to the existing social hierarchy in which vast wealth is positioned as deserved while benefits are perceived as undeserved.

Moreover, many participants expressed an understanding of the function of the media in crafting and reproducing stigma and thus resisted dominant narratives of personal blame. Discussing the popular documentary-style television programme *Benefits Street*, Zoe (38) observed:

> *It was just like all these people on benefits sitting around, going out, getting their nails done, shoplifting, smoking drugs or on alcohol. So this made people assume that everyone on benefits lives their life like that. It didn't show…real life situations where people are on benefits and they can't make ends meet- they've got one loaf of bread and like eight kids in the house... a single parent or someone who's got like, some sort of disability. It just heightens the animosity that they ['hardworking' taxpayers] feel towards people on benefits.*

This astuteness to the operation of 'stigma-optics' (Tyler, 2020, p.28) in the intentional cultivation of stigma through 'poverty porn' television echoes Tyler's (2020: 18) observation that 'people who are stigmatised are cognisant of the ways in which the "stigma machines" in which they find themselves entangled have been engineered'.

Moreover, following her comment that '*there are scroungers*' who undertake work informally in addition to claiming benefits, Lorraine (44) qualified this by commenting:

> *But at the end of the day, I wouldn't necessarily say that it's all scrounging,*

> *it's survival as well; people have gotta make a little bit of extra money because what you get paid [from the benefits system] isn't enough. So I don't... I don't really blame... I think rich people who've got loads of money call people like that scroungers… But they're not scroungers, they're just surviving.*

Understanding stigma and the scrounger narrative as *deliberately* produced to alter public perceptions constitutes a form of resistance as it allows stigmatising, blaming narratives to be challenged and rejected. As Tyler (2020, p.29) explains, 'understanding the wounds of stigma as social and political injuries can assist in the forging of networks of care and solidarity'.

7.44 Resilience and community support

In the face of continued stigma from multiple angles, the women I interviewed all demonstrated enormous strength and resilience and many described themselves in ways that reflected this, showing a resistance to stigma. Dawn (36), a single mother of four who is also the primary carer for her disabled step-son, had recently begun claiming Universal Credit after a relationship breakdown had left her and her family temporarily homeless. She described herself as "*quite strong and determined*" but explained her positive sense of identity was something she had newly developed as a result of attending confidence courses at charitable organisations including the women's organisation through which I recruited the study participants. This was reflected by Amy (23) who said that the support from the organisation had helped her learn what she called a "*healthy perspective*" of putting herself and her needs first, as a form of self-care, thus countering devaluation and stigma. Similarly, Christine (58) discussed the positive impact of the community support group she attends to help with her alcohol addiction problems, where spending time with others who are going through similar experiences helps to combat dominant individualising, blaming discourses around addiction and the stigmatising notion that it is her own fault.

The data therefore reveals the role community support plays in helping to foster collective resistance against stigma, constituting a form of agency that Lister (2004, p.129) refers to as 'getting organised'. This collective type of counter-stigma power is, as Lister (2004) argues, the most difficult form of agency for marginalised people to employ owing to the individualising stigma of poverty and benefits receipt which relentlessly posits poverty and hardship as the result of personal moral failures. Moreover, owing to lack of funding, some of the women's group activities at the organisation where I recruited research participants had

been discontinued thus limiting the power of such collective strategies of resistance against stigma.

It was hoped that allowing the women to narrate their own stories in this research project would constitute both an individual form of resistance to the denigration and stigmatisation they have faced but also a collective level in the knowledge that other women like them were sharing their stories of stigma and injustice.

7.5 Contradictions and limitations in everyday stigma management

This final section reflects on possible limitations to resistance owing to the power of stigma permeating lives and self-identities from multiple angles. This section therefore discusses the simultaneous use of other stigma responses or coping mechanisms which occurred alongside resistance as discussed in the previous section. These included the partial acceptance and internalisation of dominant stigmatising ideas and, connected to this, the defensive practice of 'othering' fellow claimants which reflects the divisive and corrosive power of stigma in weakening social solidarity and limiting the complete rejection or disavowal of stigmatising discourses. Instead, it is argued that responses to stigma are complex and contradictory, signifying neither a total acceptance nor complete disavowal of stigmatising ideas but a more ambivalent position.

7.51 Othering

The 'discursive practice' of 'othering' (Lister, 2004, p.103) whereby a stigmatised group seeks to distance themselves from stigma and bolster their own identity by referring to an undeserving 'other' has been found to be a commonly used defensive strategy for managing stigma (Shildrick and MacDonald, 2013; Chase and Walker, 2013; Patrick, 2017a). Against a context of amplified stigmatisation and hostility towards those who claim benefits, rather than refuting stigmatising stereotypes altogether, the strategy of othering serves to support and reinforce damaging stereotypes. While the use of this strategy did not appear to be as widespread as that found by Patrick (2017a), in that some participants actively refuted negative stereotypes around benefit claimants, occurrences of othering were notable and had strong resonances with popular media tropes.

As detailed in the previous chapter, the participants faced difficulties accessing and navigating the social security system, yet many contrasted their own experiences to the popular stereotype

of bogus claimants and '*people who know how to play the system*' who are less deserving of support than themselves but are able to maximise their benefit entitlement. Moreover, Lorraine (44) explained that she herself is '*not a scrounger'* and is therefore deserving of support owing to her mental and physical health conditions but that:

> *There are scroungers out there, people who are getting money off the benefits system but still going out and working on the side as well.*

Moreover, like some of the participants in Patrick's (2017a) study, two participants highlighted migrants as an undeserving 'other' set in contrast to themselves. Lorraine (44) commented:

> *You know like all the foreigners that are coming over... I can understand that they're trynna get away from their poor conditions and that, but why are they getting jobs before our own people? I don't think that's fair. Got nothing against them coming over trying to get a better life. But our country and our people should come first. And they come second. Like we wouldn't go over to their countries and, you know, erm take their stuff away from them, and they've gotta wait or something, like I don't think that's fair at all. At the end of the day, you know, it's our country and our people are getting pushed out, and you know, they're sort of like taking over. No, I don't think that's right, it's our country, our people should get seen first and then, them.*

This perspective of migrants '*taking*' from the British public is not something Lorraine just plucked from thin air but is reflective of the intentional production and weaponisation of immigration stigma in popular media and political narratives, especially during times of economic downturn (Anderson, 2010; Tyler, 2013; Travis, 2016; Burnett, 2017). This divisive blaming discourse is amplified by 'austerity politics', acting in 'chilling symbiosis' with narratives around benefit 'scroungers'; the two groups are mythologised and demonised in the popular press and political rhetoric, each symbolising a parasitical drain on public resources (Burnett, 2017, p.217; Tyler, 2013). Moreover, as exemplified by Lorraine's sentiment, the groups are pitted against one another in that an over-generous welfare state which has encouraged welfare dependency has been said to be the cause of migrants filling vacancies within the labour market, conveniently warranting the toughening up of both immigration and welfare policies (Cameron, 2011b, cited in Burnett, 2017, p.218). This example demonstrates the successful operation of divisive stigma politics in the contemporary era where one

marginalised group is incited to cast blame on another rather than to the political forces that create and profit from insecure conditions (Tyler, 2020).

This xenophobic 'othering' tendency was mirrored by Alison (50) who, as a newly single mother of two young children at the time, was taken off the Council Housing waiting list because she was not categorised as a high enough priority. She commented:

> *There was people who more urgently needed properties than me... so, single mum, young kids, you know, nowhere to live...I was taken off the list. Well I was fuming. I got in touch with the local MP and everything- they said, there's nothing I can do about it… I know from experience that people coming into the country, Polish people and everything, have got Council Houses.*

Alison's evident anguish at being removed from the Housing List manifested in her 'othering' groups who she perceived to be less deserving than herself, namely EU migrants, again demonstrating the effectiveness of contemporary stigma politics in further embedding inequalities and social divisions. Moreover, she went on to tell a story which had strong resonances with sensationalist media coverage and political debates about EU migrants exploiting the British welfare system (Schweyher *et al.*, 2019), indicating the important role of the media within the 'stigma machine' (Tyler, 2020, p.260):

> *I was at the car boot sale, and Mum said, what's wrong with you, and I said "you will not believe the conversation I have just overhead with two Polish guys, and they were saying that the Council had offered them a house but because they were bringing over all their kids, and his wife, and they had like six or seven children, they'd turned down a four bedroom house, and they were insisting that they put them in a five bedroomed house, and he said they're looking into it and they're getting back to me, and I've told them by the end of next week that I'll want to know where my house is so I can fly my kids over". I was absolutely fuming, and I thought, there's me, been in this country all my life and worked since I was sixteen and I get taken off the list because I'm not a priority.'*

Again, this demonstrates acceptance of a hierarchy of perceived deservingness whereby being born in Britain and having engaged in paid work for long periods of time are used as markers

of deservingness and legitimacy, and contrasted with an undeserving 'other'. This viewpoint was not shared across the whole participant group, however, with Kerry, Christine and Lucy actively refuting such ideas and explicitly expressing supportive and positive views about immigration.

In addition to EU migrants, Alison's indignation was also directed towards other groups who she deemed less deserving than herself:

> *So.... people...erm... you know, so like, with drug addictions, and alcoholics... and I know for fact there's two people that I know are drug dealers... drug users - they got a Council Flat.*

In similarity with the instances of othering found by Chase and Walker (2013) and Patrick (2017a), the othering strategies utilised by my participants tended to show a correlation 'between their own benefit-claiming identities and those whom they identified as undeserving' whereby individuals sought to demonstrate their own status as deserving by contrasting their own characteristics with the perceived characteristics of an undeserving 'other' (Patrick, 2017a, p.159). For both Lorraine and Alison, being born in Britain was the key marker of deservingness utilised in their discussions of immigrants. In the case of Lorraine, her ill health and the fact that she is unable to work, was used as a marker of deservingness set against 'scroungers' who fraudulently undertake work alongside benefits. Likewise, for Alison, having worked since she was sixteen signified her deservingness to social housing. Othering can thus be conceived as a strategy used to distance oneself from poverty stigma, and thus 'bolster a sense of family respectability and personal pride in managing to get by in hard conditions' (Shildrick and MacDonald, 2013, p.301). As argued by Chase and Walker (2013, p.750) the process of othering 'works against fostering social solidarity among people in shared difficult circumstances and, instead, divides the "us" into multiple "others"'. These instances of othering also exemplify the pertinence of Wacquant's (2008, p.244) concepts of 'social fragmentation and symbolic splintering', and 'the dissolution of "place"', whereby, in the context of increasing socio-economic polarisation in western capitalist economies under neoliberalism, collective forms of resistance and community ties are dissipating and societies are increasingly characterised by division. In this context, divisive stigma politics continue to thrive (Shildrick and MacDonald, 2013; Tyler, 2020).

7.5.2 The internalisation of stigma

Despite the women interviewed demonstrating resistance against classed and gendered stigma imposed on them, this did not allow them to escape the power of stigma altogether. Indeed, even where participants fiercely rejected stigmatising ideas about benefit claimants and asserted their own value and worth, they simultaneously appeared to internalise stigma on a personal level. In response to repeated experiences of stigmatisation, Lucy (44), a disabled single mother, told me:

> *I just have to try very hard to ignore it and pretend it's not personal, despite how it makes me feel. Because I can't change it. But...it hurts a lot, you know?*

Furthermore, Lucy explained that:

> *[Being aware of structural inequality] doesn't change how you feel, though. Even if you're aware of it, negativity is more powerful than positivity, isn't it? It's very difficult to be positive all the time, and especially when day-to-day, say people can't feed their families, mentally that will affect you as a mum- somebody who can't provide- you know…all sorts of stigmas, and you put those labels on yourself as well.*

This observation reflects the insidiousness of stigma in 'getting under the skin of those it subjugates' (Tyler, 2020, p.7), despite evident attempts resist it, due to the unequal power relations in the imposition of stigma (Link and Phelan, 2001). The internalisation of stigma related to discourses of good or bad motherhood was reflected in the mothers' everyday stigma management. In response to or anticipation of stigma, the mothers of the study all placed great prominence on being able to provide for their children. Lorraine (44) reflected:

> *I can't remember the last time I bought myself clothes…but the kids these days are so horrible with one another - if you haven't got the latest thing then you get skitted. You don't want that for your kids, so you do go out and skint yourself just so…they fit in.*

This perception of good motherhood tied to the consumption of branded goods for children to manage stigma and ensure children are shielded from poverty stigma mirrors earlier research (Hamilton, 2012). Like those in Hamilton's (2012) research whose efforts to avoid stigma paradoxically led to further stigmatisation, the insights of the mothers in my sample revealed

how the pressure to manage stigma by prioritising their children's needs often necessitated considerable self-sacrifice, worsening financial situations, humiliation and stigma. This catch-twenty-two contradiction was demonstrated by Donna's account discussed earlier; in ensuring her daughter could pursue her dancing lessons she faced judgement.

Furthermore, the realities of life on benefits, particularly over the last decade of welfare reform, often meant that it was not always possible to provide for even the basic needs of their children which led to further stigmatisation:

> *You know, going the food bank was one of the most humiliating things and I cried my heart out after, that's when the kids were in bed. I just felt like I wasn't able to be a proper parent 'cos I wasn't able to provide for my kids. But I will do whatever it takes to make sure my children are provided for, even if that means… humiliating myself (Dawn, 36).*

Despite Dawn's awareness of the failure of the state in providing a safety net for her family following her relationship breakdown, necessitating her food bank visit, this experience still evoked feelings of deep humiliation and inadequacy as a mother. This demonstrates the power of classed and gendered stigma in casting blame on individuals rather than on structural inequalities. Similarly, Lucy (44) described:

> *We just can't afford a football strip, so then [son's name] gets ridiculed by his friends because he hasn't got what they've all got, and then that reflects on you because you feel again, that you're not providing. There's worse things- he can live without a football strip, but it adds to it…from all these different angles, slowly people are picking and chipping and there's not much left of you. You get it from the Jobcentre, from your assessments [for disability benefits]…you're getting it from yourself. And so gradually, you just feel like you're a big puddle on the floor.*

This powerfully demonstrates the complex, dynamic and intersecting axes on which stigma operates in the lives of mothers who claim benefits whereby, despite some resistance, not being financially able to protect children from poverty-related exclusion seeps into self-perceptions and compounds with institutional and social stigma to leave a person feeling, as Lucy put it, *'beaten'*.

7.6 Conclusion

As argued by Tyler (2020), exploring the relationships between state-produced stigma and the stigma experienced on an everyday level provides a means of countering stigma (p.189). Through examining the manifestation of stigma in the everyday lives of women engaged with the benefits system this chapter has exemplified the ways in which 'welfare stigma saturates and permeates everyday encounters in the austerity state' (Tyler, 2020, p.197). In line with Tyler's (2020, p.17) observation that while stigmatisation is 'experienced intimately through stigmatising looks, comments, slights, remarks made in face-to-face or digitally mediated encounters, [it] is always enmeshed with wider capitalist structures of expropriation, domination, discipline and social control', this chapter has situated everyday experiences of stigmatisation within a broader framework of state-orchestrated stigmatisation. My findings strongly demonstrated the presence of stigma in the lives of the women I spoke to. Rather than being merely about claiming benefits, this stigma was argued to be multidimensional and layered, with various interlocking identity markers playing a role. The participants of the study lived with multiple, intersecting stigmas, where the persistent, overarching stigma attached to benefits receipt overlapped and compounded with other aspects of their identity including motherhood, disability, class position and place. This research therefore contributes to a more nuanced, holistic understanding of stigma.

In addition to presenting original findings about the manifestations and impacts of stigma power on multiple, intersecting levels, this research has also contributed further to the important and under-researched area of stigma resistance. Stigma was resisted and rejected in several important ways: through recognising the value of unpaid care as a form of work, through rejecting behavioural discourses and through expressions of pride, strength and collective community-based resistance. These findings are significant as they support the idea that stigma is not simply imposed from above but is a site of continual struggle and resistance (Link and Phelan, 2001; Tyler, 2020). Nonetheless, owing to the pervasive power of stigma permeating their lives and self-identities from multiple angles, there was the tendency for participants to, at times, partially accept and internalise stigmatising ideas. Alongside solidaristic forms of resistance, some participants engaged with the defensive practice of 'othering' fellow claimants, reflecting the divisive and corrosive function of stigma in weakening social solidarity and limiting the complete disavowal of stigmatising discourses. Based on such findings, it is argued that responses to stigma are complex and contradictory,

signifying neither a total acceptance nor complete disavowal of stigmatising ideas but a more ambivalent position. This ambivalence and contradiction in responses to stigma reflects existing research about the ways people living in poverty cope with and navigate their stigmatised identities (Shildrick *et al.*, 2013; Pemberton *et al.*, 2016; Patrick, 2016). Hence, the findings add to a relatively under-researched idea of contradictory stigma responses using the insights of women in the contemporary era.

Chapter 8: Discussion and conclusion

8.1 Introduction

This thesis has investigated the mechanisms and dynamics of stigma in the lives of women who find themselves entangled within its machinery in the context of unprecedented welfare reform and increased hostility towards benefit claimants. Utilising in-depth, semi-structured interviews informed by a feminist research paradigm, the study has illuminated the everyday experiences and perceptions of women with varied circumstances, benefit claiming groups, durations and trajectories. The stories shared by my research participants contribute to a holistic understanding of stigma as a structurally-produced, multidimensional form of power with far-reaching consequences. This research contributes towards a deeper understanding of the violent mechanisms of stigma at play within the contemporary social security system and, in particular, the gendered impacts of welfare reform and the effects of institutional, state-produced stigma on disabled claimants. Moreover, the research illuminates the power of dominant anti-welfare narratives to feed into everyday social interactions and self-perceptions in the current era of neoliberal austerity which compound and intersect with other forms of stigma related to motherhood, class, place and disability.

The chapter summarises and consolidates the main findings of this study, as discussed in chapters 6 and 7, in order to build an overarching argument and illuminate the original contribution to knowledge offered by this PhD thesis. The chapter will then evaluate the contribution of my research findings highlighting their original contribution to knowledge. The methodological decisions adopted in this research project will be reflected upon in relation to how the research design, methods and ethical decisions enabled me to fulfil the aims of this study. I then reflect on some of the possible limitations of the study and discuss potential future avenues for research. This chapter concludes with a consideration of policy implications in light of the research findings, informed by the voices of the women who shared their stories with me, before finally presenting concluding comments.

8.2 Main overall research findings

8.2.1 The embeddedness and impacts of institutional stigma

Institutional stigma is defined as stigma occurring in the process of claiming benefits (Pinker, 1970, 1971; Spicker, 1984; Baumberg *et al.*, 2012) compounding with everyday experiences and feelings of stigma. As discussed in chapter 3 of this thesis, despite some attempt to reduce

stigma in the construction of the post-war welfare state (Glennerster, 1995), institutionally-embedded stigma has remained a longstanding feature throughout the history of the British social security system which was deliberately cultivated to ration welfare expenditure and govern those who seek support (Golding and Middleton 1982; Spicker, 1984; Page, 1984; Walker, 2014; Tyler, 2020).

Just as stigma underpinned and legitimated early state provisions for the poor, most notably the 1834 Poor Law Amendment Act, to deter the so-called *undeserving* poor, such ideological assumptions were reinvigorated with the post-1979 neoliberal shift where cuts and punitive policies intended to discourage a so-called 'dependency culture' were legitimated by the framing of claimants as morally deficient and undeserving (Patrick, 2017a). Such assumptions were largely retained under New Labour's government with the notion of welfare rights coupled with responsibilities framing increasing welfare conditionality as necessary in fostering an 'active' citizen (Walters, 1997; Wetherley, 2001; Dwyer, 2004). In the contemporary welfare state there is continuity with the post-1979 reframing of welfare underpinned by stigmatising assumptions, but such institutional stigma has been amplified and extended in the austerity era supported by increasing public hostility towards benefit claimants and legitimated by stigma (Jensen and Tyler, 2015; Patrick, 2017a; Tyler, 2020).

Since the 2007/8 financial crisis, the British social security system has undergone the most of radical reforms since its inception with an increased focus on conditionality and punitiveness (Dwyer and Wright, 2014) underpinned by longstanding stigmatising assumptions about the poor. Such austerity-driven welfare reforms have entailed successive cuts to welfare provision, the amplification and extension of welfare conditionality and sanctioning extended to include groups previously not subject to such punitive interventions such as disabled people, lone parents and the under-employed (Dwyer and Wright, 2014; National Audit Office, 2016; Grover, 2019; Ryan, 2019). Welfare reforms and changes to benefit entitlement such as these have been understood by some in terms of the extension and amplification of institutional stigma embedded in the benefits system 'adding another layer to experiences of claims stigma' (Patrick, 2017a, p.154-155). While existing research acknowledges the cross-over between welfare reform and institutional stigma (Patrick, 2017a), there has been a shortage of research which explicitly addresses this important interconnection.

The findings of this thesis therefore build upon and contribute to existing knowledge about the nature of institutional stigma in the contemporary era and its impacts on women and people with disabilities. In this thesis, I have argued that, in addition to welfare reforms being legitimated by the potent, persistent stigma around benefits, they also *constitute* a form of stigma in themselves in that the processes through which they are enacted deter, demoralise, degrade and dehumanise vulnerable groups. This presents a more holistic understanding of institutional stigma than existing research informed by contemporary stigma theory (Tyler, 2020).

Through examining the experiences of my participants, a group of women engaged with the benefits system, currently or intermittently claiming a range of means-tested and non-means-tested benefits, the research revealed the ubiquity and intentionality of stigma permeating every stage of the contemporary benefit claiming process. This stigma was found to be embedded in the system's design, administration and implementation.

Firstly, the institutional stigma embedded within the system's design indicated strong contemporary resonance with the stigmatising principles designed into the 19th Century Poor Laws. Evidence of institutional stigma permeating the design of the social security system was shown through the power of deterrence which functioned to dissuade eligible people from claiming owing to the system's reputation as being degrading and difficult to access. The effectiveness of this was demonstrated through participants delaying claims for various types of benefit despite being eligible and in need or avoiding claiming a disability benefit because of the reputation of the disability benefits assessment process. My findings evidenced the daunting, complex and draining application processes through which prospective claimants must access support with them often requiring specialist knowledge or help to successfully apply for benefits. This was particularly the case for disability benefits, such as PIP, but also applied to those claiming other benefits such as Carer's Allowance and Universal Credit. Such difficulties were compounded by the move towards a digital-by-default system, supporting evidence that this has created greater complexity for claimants and more potential for administrative errors, posing challenges especially for women, those with disabilities and older people (Alston, 2018; Summers and Young, 2020). I thus argue that this constitutes a form of institutional stigma as part of the system's design, functioning to deter, confuse and degrade prospective claimants. Furthermore, gendered stigma was found to manifest in the gendered

assumptions which underpin and shape welfare policy with significant implications for women's financial autonomy.

In addition to the stigma embedded in the design of social security policies, institutional stigma was revealed to operate through the implementation of such policies, shaping claimants' experiences within the *Jobcentre* environment and with officials, and with the implementation of various forms of conditionality imposed through the threat of sanctions which serve as an omnipresent, deeply stigmatising reminder of the unequal power dynamics shaping the contemporary welfare system. My research findings illuminate the experiences and impacts of such conditionality and the punitive sanctions regime in the contemporary era, adding weight to existing knowledge about the negative impacts on claimants' mental health and the tendency of conditionality to push claimants into insecure work through 'violent proletarianisation' (Grover, 2019). Moreover, the findings draw attention to the repeated degradation forced on already ill people through assessments for disability benefits, supporting existing evidence about the inappropriateness of such forms of conditionality for disabled claimants, especially those with mental health problems, due to the tests not adequately capturing the complexity and impact of their condition and reinforcing stigma around not being believed. Indeed, many of my participants had their support denied or downgraded following assessment, reflecting the intended outcome behind the austerity-driven restructuring of disability benefits to save the government substantial amounts of money through lower claimant numbers (Portes, 2015; Hobson, 2020).

The findings therefore strongly support the notion that austerity-related reforms to the social security system are 'degrading and dehumanising' (Patrick, 2017a, p.153) and constitute a form of institutional violence designed to disproportionately target vulnerable groups (Pinker, 1970, 1971; Cooper and Whyte, 2017a, 2017b; Mills, 2018; Grover, 2019; Tyler, 2020). The findings also support evidence that institutional stigma is a widespread and pervasive form of benefits stigma (Baumberg *et al.*, 2012; Patrick, 2017a) as this was evidenced across the whole participant group. The findings offered insights into the mechanisms of institutional stigma across various types of benefit including Universal Credit (UC), Personal Independence Payment (PIP) and Employment and Support Allowance (ESA), thus contributing to existing knowledge. Interestingly, while means-tested benefits have traditionally been most associated with stigma (van Oorschot, 2002; Baumberg, 2016), this study has highlighted the stigma infused within the design and implementation of *non*-means-tested benefits, such as Disability

Living Allowance (DLA) and its replacement benefit, Personal Independence Payment (PIP) as well as Carer's Allowance (CA). Indeed, as demonstrated by the participants' experiences discussed in chapter 6, claiming non-means-tested benefits DLA and PIP was stigmatising due to the eligibility assessments introduced. Moreover, whereas Carer's Allowance does not require an assessment, claimants are still required to fill out a long and emotionally exhausting form in order for their claim to be considered which represents a form of stigma and may act as a deterrent to those in need.

By applying contemporary stigma theory (Tyler, 2020) to experiences of conditionality and welfare reform, my research enables a further understanding of the mechanisms and impacts of institutional stigma in the present era. The findings powerfully demonstrate the interconnection between recent welfare reforms and the stigma that legitimates them, also adding to understandings of their stigmatising consequences. In doing so, the research adds an original contribution to existing knowledge about the harms of austerity and welfare reform, explicitly linking such harms to the concept of stigma. My research therefore contributes to understandings of the contemporary benefits system as a key vehicle for the continued production of stigma and the amplification of inequalities relating to gender, class and disability. The policy recommendations in light of these findings will be discussed in section 8.5.

8.2.2 Everyday stigmatisation and stigma management

My findings (discussed in chapter 7) illuminate how stigma manifests on an everyday level in women's lives and locates such experiences within the wider politics of state-orchestrated stigmatisation (Tyler, 2020). As Tyler (2020, p.17) explains, while stigmatisation is 'experienced intimately through stigmatising looks, comments, slights, remarks made in face-to-face or digitally mediated encounters, [it] is always enmeshed with wider capitalist structures of expropriation, domination, discipline and social control.' The findings therefore build on existing research about experiences of benefits stigma operating on a social and personal level (Baumberg *et al.*, 2012; Baumberg, 2016; Patrick, 2017a) in everyday life but my research explicitly connects such experiences to structural stigma power (Tyler, 2020).

My findings strongly demonstrated the presence of stigma in the lives of the women I spoke to. Rather than being merely about claiming benefits, this stigma was argued to be multidimensional and layered with various intersecting identity markers playing a role. The

intersection of various stigmas is an important but under-researched area (Nyblade *et al*., 2003) and, therefore, this finding has made a significant contribution to knowledge about stigma as a more nuanced and holistic experience than being related to a single discredited characteristic. Indeed, as discussed in chapter 7, the participants of the study lived with multiple, intersecting stigmas where the persistent, overarching stigma attached to benefits receipt overlapped and compounded with other aspects of their identity including motherhood, disability, class position and place.

In the discussion of these axes of stigma, rather than distinguishing neatly between social and personal stigma (Baumberg, 2016), the everyday stigma experiences of the women I spoke to were difficult to disentangle to fit into this framework and, therefore, they were understood in a more holistic, interconnected and nuanced way. Moreover, building on Baumberg (2016) and Patrick (2017a), the stigma operating on a social level is discussed both in terms of the *direct* experiences of judgement from others and the more *indirect*, but equally painful, perception or anticipation of such judgement both of which can manifest on a personal level and impact on self-perceptions.

Unsurprisingly, the stigma attached to claiming benefits was found to be widespread with virtually all participants showing an awareness of popular stereotypes of benefit claimants. Central to this was the notion of a lack of deservingness which emerged from a perceived lack of reciprocity due to not being in paid employment, mirroring a finding by Baumberg *et al.* (2012). This type of stigma was found most commonly in self-perceptions, social comparisons with people who work and perceptions of other people's attitudes. Moreover, some participants discussed painful stigmatising social encounters where other people have expressed judgement about them not being in paid work. This form of stigma correlated strongly with dominant narratives, with similar language and imagery referred to, thus demonstrating the power of state produced stigma to seep into everyday encounters and identities (Tyler, 2020).

Intersecting with benefits stigma, the findings contributed to knowledge about the stigma faced by mothers who claim social security benefits, further evidencing the persistent devaluation of caring labour and the perception that benefits are undeserved. Again, this manifested in being positioned as 'lazy' and 'undeserving'. The stigma of single motherhood was revealed to have ongoing power in the contemporary era with the single mothers of the study documenting the multiple dimensions of moral judgements, financial hardship and the hard work involved in

bringing children up without support. Additionally, the findings demonstrated the power of the 'benefit mum' stereotype crafted within media and political discourses (Allen *et al.*, 2014; Evans, 2016). The mothers demonstrated an awareness of the stereotype of the irresponsible 'benefit mum' exploiting the social security system and having children to maximise benefit entitlement with Dawn revealing that she was subject to this kind of judgement. Furthermore, Natalie, a mother of four, expressed concern that others may perceive her and her motivations for having children in this way because of the way mothers who claim benefits are persistently stereotyped in the media, especially in poverty porn television.

Another important element of the everyday stigma experienced by women in the study was that disability-directed stigma intersected with the stigma of claiming benefits. As discussed in chapter 7, disability stigma was evident in the interviews with women with physical disabilities as well as mental health conditions. For Sue and Lucy, who both have degenerative disabilities affecting their mobility, this stigma manifested in a reluctance to use a wheelchair despite considerable mobility issues owing to the chair being a visible 'stigma symbol' (Goffman, 1963). Moreover, several disabled claimants had experienced judgement from others and with it the implication that they may be well enough to work, demonstrating state-crafted stigma, which has legitimised the radical retrenchment of disabled people's benefit entitlement in the austerity era, seeping into everyday attitudes and interactions.

Class and place-based stigma was also revealed in the findings, contributing to knowledge in an under-researched area in terms of the impacts of territorial stigmatization (Wacquant, 2007, 2008) on the lived experiences of those at the receiving end. Donna's account of being judged and referred to as 'rough' due to residing in a place with a reputation for being occupied by benefit claimants, 'scavengers' and 'bums' revealed the pain and exclusion that came from this. She recalled, for instance, her middle-class school friends not being allowed to come to her house and her teacher commenting negatively on the area where she lived. This account of externally-imposed stigma contrasted with Tracy's experience of the strong community ties within the estate where she lived as a single parent when her children were young, reflecting McKenzie's (2015) findings about the sense of belonging within working-class communities. Nonetheless, the findings supported the assertion that increasing stigma has the power to corrode such forms of collective solidarity and weaken class-based ties, due to its inherently divisive politics causing a tendency to blame and shame others as well as themselves (Gough *et al.*, 2006; Wacquant, 2008; Tyler, 2020).

In addition to presenting original findings about the manifestations and impacts of stigma on multiple, intersecting levels, this research has also contributed further to the important and under-researched area of stigma resistance. Indeed, as documented in chapter 7, stigma was resisted and rejected in several important ways: through recognising the value of unpaid care as a form of work, through rejecting behavioural discourses and through expressions of pride, strength and collective community-based resistance. These findings are significant as they support the idea that stigma is not simply imposed from above but is a site of continual struggle and resistance (Link and Phelan, 2001; Tyler, 2020).

Nonetheless, owing to the pervasive power of stigma permeating their lives and self-identities from multiple angles, there was the tendency for participants to use other stigma management techniques simultaneously alongside such forms of resistance. The data revealed that in addition to the solidaristic forms of resistance shown, participants also indicated partial acceptance and internalisation of dominant stigmatising ideas and, connected to this, the defensive practice of 'othering' fellow claimants thus reflecting the divisive and corrosive power of stigma in weakening social solidarity and limiting the complete rejection or disavowal of stigmatising discourses. Othering tended to correlate with media stereotypes illustrating the power of the stigma machine in influencing opinions about particular groups (Tyler, 2020). Interestingly though, unlike the mothers in Shildrick and MacDonald's (2013) research, the mothers in my research did not engage in othering against other mothers. Based on such findings, it is argued that responses to stigma are complex and contradictory, signifying neither a total acceptance nor complete disavowal of stigmatising ideas, but a more ambivalent position reflecting findings from Pemberton *et al.* (2016). Hence, these findings add to a relatively under-researched idea of contradictory stigma responses using the insights of women in the contemporary era.

8.2.3 Women's position within the welfare state

My data supported feminist critiques of the welfare state and the contemporary persistence of the issues raised by feminist scholars since the 1970s. Through exploring and centring the narratives of women currently or intermittently claiming a range of means-tested and non-means-tested benefits, the findings of this thesis contribute to understandings of women's position within the contemporary British welfare state in their roles as mothers, carers, workers and jobseekers. As highlighted in chapter 4, gender has been neglected in policy analyses of the post-war welfare state (for example, Marshall, 1950; Esping-Andersen, 1990), however

feminist scholars have critiqued such an absence and highlighted gendered assumptions underpinning the creation of the welfare state (Wilson, 1977; Langan and Ostner, 1991; Fraser, 1994). Looking at welfare states through a gendered lens allows an appreciation of welfare regimes 'not just a set of services', but 'also a set of *ideas* about society, about the family, and – not least important – about women' who play an essential role within it (Wilson, 1977, p.9, emphasis my own). The findings discussed in chapters 6 and 7 of this thesis illuminate the ongoing importance of examining gender relations within the contemporary welfare state and the deeply gendered relationship between the interdependent aspects of welfare, paid work and unpaid care (Lewis, 1992, 1997). They also add weight to the notion that, owing to the assumed genderlessness of social welfare policies even today, women's concerns remain marginalised and welfare policies continue to reinforce gendered assumptions (Williams, 1989; Lister, 2000; Millar and Ridge, 2017; Griffiths, 2017; Reis, 2018a, 2018b).

The gendered ideological underpinnings of the post-war British welfare state can still be seen to have resonance today (Fraser, 1994). The post-war welfare state was predicated on the normative, middle-class, male-breadwinner, female-homemaker family model and hence depended on women's unpaid and taken-for-granted caring labour (Wilson, 1977; Fraser, 1994, Clarke *et al*., 2001). This has had significant implications for women's citizenship and financial autonomy due to their historic exclusion from the paid labour market (Lewis, 1997; Lister, 2000). While the post-war welfare state was predicated on women's financial dependence on their husbands within the normative framework of the male-headed, heterosexual nuclear family, since the 1970s, with the breakdown of the post-war welfare consensus, the widespread feminisation of labour and the diversification of family structures, women's dependence has been in some ways shifted on to stigmatised, means-tested benefits, and/or flexible, insecure forms of work to fit around caring responsibilities (Lewis, 1997; Fraser, 1994). In this context, Fraser (1994) argues that the welfare state does not adequately meet women and children's needs.

My research findings discussed in both chapters 6 and 7 strongly support this. Caring responsibilities, which are gendered, were a key contextualising factor shaping the participants' engagement with the benefits system. Ten of the sixteen women I interviewed were mothers, seven of whom had single-handedly brought up their children as lone parents for at least a significant proportion of their children's lives. For some women, it was the transition to lone parenthood that prompted their initial reliance on the benefits system. Three mothers have a

child with a disability and two currently claim additional benefits for the additional daily living costs that these disabilities incur. For women whose children are now adults and no longer living with them, being a mother shaped their engagement with the system when their children were younger. As revealed in chapter 7, the accounts of the mothers of the study revealed the self-sacrifice involved in surviving on a low income and ensuring children's needs are met, sometimes necessitating borrowing food and money, falling into debt and having to use food banks, indicating the enduring relevance of feminist concerns about the inability of liberal welfare states to cater to women and children's needs (Fraser, 1994). Dawn's experience of temporary homelessness following her relationship breakdown also provided a stark example of the risks of gendered assumptions underpinning welfare policies in reinforcing women's financial independence on their partners (Annesley and Bennet, 2011). Dawn's account supported Griffiths' (2017) suggestion that benefit rules for cohabiting couples may impact on women's partnership decisions, as she explained she would now be more reluctant about entering into a new relationship due to its implications for her financial autonomy.

Existing literature and research suggest that women who rely on benefits have been steadily subject to increased pressure to undertake paid work over the last two decades (Johnsen, 2016), while caring labour is increasingly devalued and stigmatised (Mann and Roseneil, 1994; Evans, 2016; Millar and Ridge, 2017). This devaluation was revealed in chapter 7 whereby mothers' unpaid caring roles were ignored and consequently their deservingness to benefits was called into question owing to them not undertaking paid employment. The findings also add knowledge about the intersection of gender and disability and the ability of the welfare state to cater for disabled people's needs. Health-related issues were key factor motivating reliance on benefits for the participant group with five women currently claiming disability-related benefits (three for physical disabilities and two for mental ill health). There was also a group of participants who reported suffering with health problems that were not formally recognised by the benefits system. For example, Amy (23, UC) was recently diagnosed with Autism and had also suffered with anxiety, depression and psychosis but following assessment her PIP claim was denied. Additionally, Michelle (48, UC) was self-employed and claimed Universal Credit to supplement fluctuations in her income, however following surgery on her back she has been unable to work for nine months and suffers with severe back pain, anxiety and depression. These findings had implications for understanding the impact of welfare reform on disabled

women's independence. The implications of such findings in terms of policy recommendations will be discussed in section 8.5.

8.3 Original contribution to knowledge

This thesis offers an original contribution to knowledge in an under-researched area. The findings reveal rich insights into the complex dynamics of stigma and resistance in the lives of female (and disabled) benefit recipients in the contemporary context. In doing so, the thesis demonstrates the ubiquity of stigma as a pervasive form of power driving, legitimating and amplifying inequalities based on gender, class and disability (Tyler, 2020). Through a small-scale qualitative study, informed by a feminist methodological approach (discussed in depth in chapter 5), this thesis has provided a detailed, in-depth account of the lives and experiences of sixteen women living in Merseyside and currently or intermittently claiming means-tested and non-means-tested benefits. It has thus illuminated and centred the voices of a marginalised group – working-class and disabled women claiming benefits - that are often spoken *about*, but rarely heard.

Such accounts represent an original contribution to knowledge as they illuminate the complex dynamics of stigma felt and experienced in the context of ongoing welfare reform and increased stigmatisation of benefit claimants. Using Tyler's (2020) reconceptualisation of stigma has enabled this project to add to existing knowledge about the operation and impacts of institutional stigma in the current benefits system. The findings illustrate how state-orchestrated stigma bleeds into everyday interactions and self-perceptions, and shed light on the under-researched area of stigma resistance. Tyler's 'conceptual device' of the 'stigma machine' (2020, p.259) enables an understanding of stigma that goes far beyond its ahistorical and apolitical usage in twentieth century sociology, to an understanding which necessitates interrogating the ongoing production of stigma power from above, or what Tyler (2020, p.89) terms 'stigmacraft'. The research findings also contribute to understandings of the how class, disability and gender intertwine in experiences of stigma in the current era of neoliberal austerity.

8.4 Reflections, limitations and implications for future research

The feminist methodology used (discussed in chapter 5) was successful in enabling the collection of rich, detailed, insightful data from a group of women whose stories would otherwise go unheard. The study was based on a small sample size of sixteen women and, as

with most qualitative research projects, the sample was not intended to directly represent or enable generalisability to the wider population (Mason, 2018). Nonetheless, as revealed in the summary and appraisal of the research findings discussed earlier in this chapter, the findings reveal parallels with existing research conducted in the contemporary era with groups affected by poverty and welfare reform, hence the data encapsulates a range of experiences which, sadly, are not isolated events but may be shared by others in similar circumstances. This is also indicated by the fact that similar patterns could be identified across the participant group.

However, the strength of the research findings arguably lies in the nuance, complexity and uniqueness of each woman's story and circumstances. The variation in the participant group in terms of age, motherhood status, living circumstances, benefit claiming category, duration and trajectory benefited the research in many ways. These variations stemmed from my desire to put gender at the heart of the research and capture a range of experiences. Hence, as discussed in chapter 5, I did not wish to be too rigid or prescriptive with my sample, for example, by only interviewing lone parents or recipients of a certain type of benefit, because I was concerned that this decision may have pre-assumed stigma and I wanted to capture a range of experiences.

The varied participant group enabled me to capture the role of stigma in women's lives and their broader position in the welfare state, which may not have been possible if I had been overly prescriptive with my sample. This variation helps the research to challenge stigmatising assumptions about benefit claimants who are presented in media and political narratives as a homogenous, faceless problem category, rather than as individuals. Indeed, as argued by Lister (2015), the untold stories and experiences from marginalised groups are essential in changing attitudes. Additionally, the variety of benefits claimed in the sample enabled an insight into the impacts of various interconnected welfare reforms and their implications for stigma, including experiences with newer benefits such as Universal Credit, Personal Independence Payment and Employment and Support Allowance, and in so doing revealed a novel finding about stigma and non-means-tested benefits.

Nonetheless, future research could, based on the findings of this project, explore the implications of one particular benefit or policy shift in terms of its associated stigma enabling more specificity than was possible in this PhD research. Nonetheless, the aims were not to discuss a single group or benefit, but to situate women's experiences within the context of welfare reform and emphasise the role of stigma in framing experiences of welfare more

generally. The findings also enabled an insight into the transitory work and benefit trajectories of the women I interviewed, indicating the value of conducting longitudinal research in this field. Owing to time constraints of this doctoral research, it was not possible to conduct longitudinal research, however existing qualitative longitudinal research has illuminated the merit of this approach for capturing the changes in people's lives over time (Millar, 2007; Shildrick *et al.*, 2012; WelCond, 2018; Wright and Patrick, 2019; Dwyer and Patrick, 2020). Indeed, the prevalence of the 'low-pay, no-pay' cycle (Shildrick *et al.*, 2012), coupled with ongoing welfare reform, signifies the limitations of using a one-off interview as a snapshot in time.

Though my ethnically homogeneous sample was not intentional, the fact that there was no ethnic diversity within my study could be considered a limitation, especially given that austerity and welfare reform are shown to disproportionately impact Black and Minority Ethnic women (Hall *et al.*, 2017). Consequently, future research with an ethnically diverse group would help illuminate the intersection of race and ethnicity with classed and gendered inequalities in experiences with the social security system.

Furthermore, my data collection took place prior to the beginning of the COVID-19 crisis, therefore future research could examine the lived experiences of ongoing changes within the social security system in the current context of the pandemic. Research highlighting the disproportionate impacts of the pandemic on women's paid (Francis-Devine, 2021) and unpaid (Seedat and Rondon, 2021; OECD, 2021) work indicates that examining women's roles and experiences within this context is especially necessary. Furthermore, recent research has highlighted the impact of the pandemic on benefit claiming experiences (Manji, 2020; Patrick *et al.*, 2022) and the stigma attached to claiming (Patrick, 2020), indicating that this is a fruitful area for further examination.

8.5 Key policy recommendations

As detailed in chapter 6, the historically-embedded institutional stigma characterising the British social security system permeates all aspects of the system indicating the need to redesign it from the bottom up. As such, I will not present a complete range of suggestions for "fixing" the system here. I will instead highlight core aspects for improvement based on my data. As advocated elsewhere (Jensen *et al.*, 2019; Manji, 2020), using the insights of those with first-hand experience of the benefits system would be essential.

To counter stigma, the findings indicated the need to infuse the principles of dignity and respect through ensuring people in need are treated with fairness and compassion and as individuals rather than customers. Such principles have been key to the redesign of the Scottish social security system (Gov.scot.uk, 2022). This would include redesigning the system so that it allows its users choice (for example, between paid employment and unpaid caring work), rather than being characterised by fear and the threat of destitution (Grover, 2019; Manji, 2020). Removing sanctions would be a key step to removing this element of fear, as sanctions have not only been found to be damaging to claimants' mental health and financial security, but they are also ineffective in bringing claimants' closer to paid employment (Patrick, 2017c). The system should also be redesigned to that it is easy to access and navigate which, as indicated in my findings, rather than encouraging people to exploit the system, would help to ensure that those in need can access financial support in a timely and dignified way. Indeed, the longstanding deterrence which continues to characterise the system has been revealed to cause real hardship and prevent many from claiming support to which they are entitled.

Another core change to the social security system would be a radical redesign of the disability benefit assessment process. This redesign ought to be geared towards recognising and mitigating against the dehumanisation and power imbalances in the assessment scenario. This might encompass ensuring that decisions made are fair, perhaps with the addition of an independent regulator to oversee decision-making processes. Additionally, rather than being assessed according to a rigid, points-based system, assessments need to accurately capture the complexity of people's health problems, including mental health. This redesign would help to ensure that disabled people are treated like human beings rather than 'tick boxes' (Manji, 2020, p.1). Ensuring that chronically ill people do not have to undergo repeated assessments would also be a key priority, along with safeguarding mental wellbeing in the assessment process. Disability policies also need to ensure that disabled people's independence is not automatically taken as evidence capability to work but to ensure disabled people can make agentic life choices based on their own subjective judgements of their condition. Overall, the system should ensure disabled people can live an 'autonomous, safe and dignified life' (Reis and De Henau, 2018, p.6).

Additionally, the findings have indicated the need to recognise other forms of social contribution as valuable besides paid work, including caring labour and volunteering, so that people who undertake such activities are not penalised. This would help to decommodify the

system and remove stigma. Owing to the ongoing neglect of gender in policy considerations, the findings reveal the need to put gender at the centre of welfare policies in order to mitigate against gendered harms, promote choice and ensure financial independence. Such changes would be more effective alongside changes to childcare provision and ensuring jobs offer financial security.

Though, as the findings suggest, institutional stigma is embedded on a systemic level rather than being at the hands of individual *Jobcentre* officials, the findings indicate that advisors exercise discretion in their decision making about claimants' lives and may make stigmatising judgements about claimants. For example, Lucy's account of working at the *Jobcentre* confirmed this, and Donna was called lazy by her advisor. It might, therefore, be worthwhile for staff to have training on delivering a person-centred approach. Such training ought to encompass a full awareness of the structural barriers and inequalities faced by those living on low incomes, and how gender, race and disability intersect and compound such barriers. This would help to challenge individualising assumptions and ensure appropriate support can be given. In addition to everything suggested, an essential change would be to ensure that the amount of money provided by the benefits system allows its users dignity, security and comfort, as opposed to stress, hardship and stigma. Indeed, as argued by Walker *et al.* (2012, p.10) 'social security systems that promote personal dignity stand to overcome the debilitating psychological and social effects of poverty as well as tackling material deprivation'. The changes suggested in this section would work towards such aims.

8.6 Overall concluding comments

This thesis set out to develop a deeper understanding of the gendered dynamics of stigma and social security receipt in the context of a changing welfare system and an accompanying trend of increasing hostility towards claimants. My desire to explore and uncover the mechanisms of stigma in the lives of women claiming benefits stemmed from an awareness of two interconnected and simultaneous developments. Firstly, the unprecedented scale of austerity-driven reform to the British social security system over the past decade has been shown to disproportionately impact on women, disabled people and (the mostly female) carers of disabled children (Reis and De Henau, 2018; Alston, 2018). Secondly, during this period, we have witnessed the amplification of benefits stigma in political rhetoric, media narratives and public attitudes (Baumberg *et al.*, 2012; Taylor-Gooby, 2015; Tyler, 2020), with women and disabled people stigmatised in unique ways. In this context, I believed it was necessary to

empirically explore women's experiences, in order to better understand and challenge gendered welfare stigma and its intersection with disability.

By illuminating the lived experiences and perspectives of women at the receiving end of punitive welfare shifts, using a feminist approach, this doctoral research has added to understandings about the ongoing significance and prevalence of stigma in the contemporary era, its mechanisms and impacts. The research therefore supports existing knowledge on the effects of contemporary welfare reform on claimants' lives, including their disproportionate effects on women and disabled people, in addition to knowledge about everyday forms of stigmatisation and resistance. The project used the contemporary understanding of stigma as a productive form of power which worked to embed and amplify inequalities (Tyler, 2020) as its theoretical starting point, enabling the research findings to build on and bring together existing knowledge. This allowed for a holistic understanding of the dynamics of stigma and resistance in the contemporary era, operating on an interconnected institutional and everyday level. The research has thus contributed to knowledge about the 'multiple stigma mechanisms' (Link and Phelan, 2001, p.380) or 'sites of stigma production' (Tyler, 2020, p.260) which constitute interdependent cogs within the well-oiled 'stigma machine' (Tyler, 2020) working together to facilitate the legitimation and perpetuation of social inequalities.

The findings demonstrate the power, pervasiveness and multidimensional nature of stigma in the contemporary neoliberal era, manifesting on multiple intersecting levels. The dominant stigmatising discourse around poverty and social security receipt was found to permeate all aspects of the women's lives. The study contributes to understandings of institutional stigma embedded in the design and implementation of the contemporary social security system, connecting the unprecedented punitive shifts in provision to the stigma which legitimates such changes, as well as demonstrating how welfare policy interventions are themselves stigmatising in their impacts. In conjunction with institutional stigma, the findings reveal the power and ubiquity of stigma operating on an everyday level in social encounters and self-perceptions, prompting a variety of resistance strategies. Nonetheless, individualised responses to stigma are revealed to be at times contradictory, not always signifying a complete disavowal of dominant stigmatising ideas, demonstrating the power and insidiousness of state-produced stigma.

Moreover, through centring women's lives and experiences, the research has contributed to existing knowledge about women's position within the welfare state shaped by the gendered relationship between welfare, work and care. It has illuminated the persistence of gendered assumptions underlying welfare policies and their impacts, understood through a framework of stigma. The stories documented within this thesis demonstrate a far-from-straightforward or uniform trajectory and thus challenge popular, stigmatising stereotypes about benefits claimants, particularly mothers and those with disabilities and health problems.

Bibliography

Abbas, J. and Jones, K. (2018) 'In-work conditionality is based on weak evidence – but will the policy sink or swim?', *LSE Blogs*, 12 September. Available at: http://blogs.lse.ac.uk/politicsandpolicy/in-work-conditionality-public-opinion/?%. (Accessed: 15 September 2018).

Adair, R. (1996) Courtship, Illegitimacy and marriage in early modern England. Manchester: Manchester University Press.

Ahmedani, B.K. (2011) 'Mental Health Stigma: Society, Individuals and the Profession', *Journal of Social Work Values and Ethics*, 8(2), pp. 1-14.

Allen, K., Tyler, I. and De Benedictis, S. (2014) 'Thinking with "White Dee": The Gender Politics of "Austerity Porn"', *Sociological Research Online*, 19(3), pp. 256-262.

Allen, K., Mendick, H., Harvey, L. and Ahmad, A. (2015) 'Welfare queens, thrifty housewives, and do-it-all mums: celebrity motherhood and the cultural politics of austerity', *Feminist Media Studies*, 15(6), pp. 907-925.

Alonzo, A.A. and Reynolds, N.R. (1995) 'Stigma, HIV and AIDS: an Exploration and Elaboration of a Stigma Trajectory', *Social Science & Medicine*, 41(3), pp. 303-315.

Alston, P. (2018) Visit to the United Kingdom of Great Britain and Northern Ireland: Report of the Special Rapporteur on Extreme Poverty and Human Rights. United Nations Human Rights Office of the High Commissioner, 16 November. Available at: https://www.ohchr.org/documents/issues/poverty/ (Accessed: 1 December 2018).

Alston, P. (2019) *Digital technology, social protection and human rights: Report*. United Nations Human Rights Office of the High Commissioner, 11 October. Available at: https://www.ohchr.org/EN/Issues/Poverty/Pages/DigitalTechnology.aspx (Accessed: 20 October 2019).

Anderson, B. (2010) 'British Jobs for British Workers: Understanding Demand for Migrant Workers in Recession', *Whitehead Journal of Diplomacy and International Relations*, 11(1), pp. 103-114.

Angermeyer, M. C., Schulze, B. and Dietrich, S. (2003) 'Courtesy Stigma: A focus group study of relatives of Schizophrenia patients', *Social Psychiatry and Psychiatric Epidemiology*, 38(10), pp. 593–602.

Annesley, C. and Bennett, F. (2011) 'Universal Credit may reinforce the traditional "male breadwinner" model and affect many women's access to an income', *LSE Blogs*, 21 June. Available at: https://blogs.lse.ac.uk/politicsandpolicy/universal-credit-inequality/ (Accessed: 8 December 2017).

Ariés, P. (1973) *Centuries of Childhood*. Harmondsworth: Penguin.

Babbie, E. (2010) *The Practice of Social Research* (12th edition). California: Wadsworth

Bagguley, P. and Mann, K. (1992) 'Idle Thieving Bastards? Scholarly Representations of the "Underclass"', *Work, Employment & Society*, 6(1), pp. 113–126.

Barlee, E. (1863) *A Visit to Lancashire in December 1862*. London: Seeley & Company.

Barnes, C. and Mercer, G. (1997) 'Breaking the mould? An introduction to doing disability research', in Barnes, C. and Mercer, G. (eds.) *Doing Disability Research*. Leeds: The Disability Press, pp. 1-14.

Barnes, C. and Mercer, G. (2004) 'Theorising and Researching Disability from a Social Model Perspective', In: Barnes, C. and Mercer, G. (eds.) *Implementing the Social Model of Disability: Theory and Research.* Leeds: The Disability Press, pp. 1-17.

Barr, N. (2004) *Economics of the Welfare State* (4th edition). Oxford: Oxford University Press.

Barr, B., Taylor-Robinson, D., Stuckler, D., Loopstra, R., Reeves, A. and Whitehead, M. (2016) '"First, do no harm": Are disability assessments associated with adverse trends in mental health? A longitudinal ecological study', *Journal of Epidemiology and Community Health*, 70(4), pp. 339-345.

Bauman, Z. (1998) *Work, Consumerism and the New Poor*. Buckingham: Open University Press.

Bauman, Z. (2011) 'The London riots– on consumerism coming home to roost', *Social Europe Journal*. Available at: https://dedona.wordpress.com/2011/08/11/the-london-riots-%E2%80%93-on-consumerism-coming-home-to-roost-zygmunt-bauman

Baumberg, B. (2014) 'Benefits and the cost of living: Pressures on the cost of living and attitudes to benefit claiming', in Park, A., Bryson, C. and Curtice, J. (eds.), *British Social Attitudes: the 31st Report*. London: National Centre for Social Research, p.95-122.

Baumberg, B. (2016). 'The Stigma of Claiming Benefits: A Quantitative Study', *Journal of Social Policy*, 45(2), pp. 181-189.

Baumberg, B., Bell, K., Gaffney, D., with Deacon, R., Hood, C. and Sage, D. (2012). *Benefits Stigma in Britain*. London: Elizabeth Finn Care/Turn2us.

BBC News (2017) 'Thousands have disability vehicles taken away', 12 April. Available from: https://www.bbc.co.uk/news/uk-39575293 (Accessed: 2 February 2018).

Beatty, C. and Fothergill, S. (2016) *The Uneven Impact of Welfare Reform: The Financial Losses to Places and People*. Sheffield: Centre for Regional Economic and Social Research, Sheffield Hallam University with Oxfam and Joseph Rowntree Foundation.

Berkowitz, S. (1997) 'Analyzing qualitative data', in Frechtling, J. and Sharp, L. (eds.), *User-friendly handbook for mixed method evaluations*. Arlington, VA: Division of Research, Evaluation and Communication, National Science Foundation. (Chapter 4). Available at: http://www.nsf.gov/pubs/1997/nsf97153/start.htm (Accessed: 4 March 2018).

Beveridge, W. (1942) *Social Insurance and Allied Services*. London: HMSO.

Bhattacharya, T. (2020) 'Social Reproduction and the Pandemic', interviewed by S. Jaffe for *Dissent*, 2 April, Available from https://www.dissentmagazine.org/online_articles/social-reproduction-and-the-pandemic-with-tithi-bhattacharya (Accessed: 16 February 2021).

Biewen, M. and Steffes, S. (2008). 'Unemployment Persistence: Is There Evidence for Stigma Effects?', *ZEW - Centre for European Economic Research*, Discussion Paper No. 08-057. Available at: http://papers.ssrn.com/sol3/papers.cfm?abstract_id=1266064 (Accessed: 10 November 2015).

Blaikie, N. (2000) Designing Social Research: The Logic of Anticipation. Cambridge: Polity Press.

Blair, T. (2002) 'My Vision for Britain', *The Guardian*, 10 November. Available at: https://www.theguardian.com/politics/2002/nov/10/queensspeech2002.tonyblair (Accessed: 10 May 2017).

Blumer, H. (1969) *Symbolic Interactionism: Perspective and Method*. Englewood Cliffs, NJ: Prentice-Hall.

Boland, T. and Griffin, R. (eds.) (2015). *The Sociology of Unemployment*. Manchester: Manchester University Press.

Booth, C. (1902) Life and Labour of the People in London. London: Macmillan.

Bos, A.E.R., Pryor, J.B., Reeder, G.D. and Stutterheim, S.E. (2013) 'Stigma: Advances in Theory and Research', *Basic and Applied Social Psychology*, 35(1), pp. 1-26.

Bottero, W. (2011) 'Personal life in the past,' in May, V. (ed.) *Sociology of personal life*. Basingstoke: Palgrave Macmillan. pp. 22-34.

Bourdieu, P. (1991) *Language and Symbolic Power*. Cambridge: Polity Press.

Bradshaw, J., Ditch, J., Holmes, H. and Whiteford. P. (1993) 'A Comparative Study of Child Support in Fifteen Countries', *Journal of European Social Policy*, 3(4), pp. 255-271.

Brand, J. (2015) 'The Far-Reaching Impact of Job Loss and Unemployment', *Annual Review Sociology*, 41(1), pp. 359-375.

Braun, V. and Clarke, V. (2006) 'Using thematic analysis in psychology', *Qualitative Research in Psychology*, 3, pp. 77-101.

Briant, E., Watson, N. and Philo, G. (2011) *Bad News for Disabled People: How the newspapers are reporting disability*. Glasgow: Strathclyde Centre for Disability Research and Glasgow Media Unit.

Briar, C. (1997) Working for Women? Gendered Work and Welfare Policies in Twentieth-Century Britain. London: Routledge.

British and Irish Legal Information Institute (2017) 'England and Wales High Court (Administrative Court) Decisions', 21 December. Available at: http://www.bailii.org/ew/cases/EWHC/Admin/2017/3375.html (Accessed: 2 January 2018).

British Sociological Association (2017) *Statement of Ethical Practice*. BSA: Durham.

Brown, J. (1990) 'The Focus on Single Mothers', in Murray, C. *The Emerging British Underclass*. London: Institute of Economic Affairs, pp. 43-48.

Bruegel, I. (1983) 'Women's Employment, Legislation and the Labor-Market', in Lewis, J. (ed.), *Women's Welfare, Women's Rights*, London: Croom Helm, pp. 130-69

Bryman, A. (2016) *Social Research Methods* (5th edition). Oxford: Oxford University Press.

Bulman, M. (2017) ‘High Court rules Tories' disability benefit changes “blatantly discriminate” against mental health patients’, *The Independent*, 21 December. Available at: https://www.independent.co.uk/news/uk/home-news/disability-benefit-changes-mental-health-discrimination-high-court-ruling-mind-a8122861.html (Accessed: 2 January 2018).

Burnett, J. (2017) ‘Austerity and the Production of Hate’, in Cooper, V. and Whyte, D. (eds.) *The Violence of Austerity*. London: Pluto Press, pp. 217-223.

Butler, P. (2013) ‘Benefit cuts: reforms will leave disabled people “ghettoised and excluded”’, *The Guardian*, 14 January. Available at: https://www.theguardian.com/society/patrick-butler-cuts-blog/2013/jan/14/disability-mobility-cuts-ghettoise-and-exclude-motability-benefits (Accessed: 18 February 2020).

Cameron, D. (2008) ‘David Cameron's speech in full’, *The Guardian*, 17 October. Available at: www.theguardian.com/politics/2008/oct/17/davidcameron-economy (Accessed: 2 October 2016).

Cameron, D. (2011a) ‘PM’s speech on the Welfare Reform Bill’, *Gov.uk*, 17 February. Available at: https://www.gov.uk/government/speeches/pms-speech-on-welfare-reform-bill (Accessed: 2 October 2016).

Cameron, D. (2011b) ‘Prime minister’s Address to Conservative Party Members on the Government’s Immigration Policy’, *The Guardian*, 14 April. Available at: https://www.theguardian.com/politics/2011/apr/14/david-cameron-immigration-speech-full-text (Accessed: 20 January 2022).

Carabine, J. (2001) ‘Constituting sexuality through social policy: The case of lone motherhood 1834 and today’, *Social Legal Studies*, 10(3), pp. 291-314.

Carroll, N. J. (2017) *Lone Mothers' Experiences of Stigma: A Comparative Study*. Doctoral thesis, University of Huddersfield.

Cass, B. (1994) ‘Citizenship, Work and Welfare: The Dilemma for Australian Women’, *Social Politics*, 1(1), pp. 106-24.

Chase, E. and Walker. R. (2013). ‘The co-construction of shame in the context of poverty: Beyond the threat to the social bond’, *Sociology*, 47(4), pp. 739–754.

Clarke V. and Braun, V. (2013) ‘Teaching thematic analysis: Overcoming challenges and developing strategies for effective learning’, *The Psychologist*, 26(2), pp. 120-123.

Clarke, J., Langan, M. and Williams, F. (2001) 'The Construction of the British Welfare State 1945-1975', in Cochrane, A., Clarke, J. and Gewirtz, S. (eds.), *Comparing Welfare States,* (2nd edition), London: Sage, pp. 29-70.

Clery, E., Lee, L. and Kunz, S. (2013) Public attitudes to poverty and welfare, 1983–2011: Analysis using British Social Attitudes data. London: NatCen for the Joseph Rowntree Foundation.

Clery, E. (2015) 'Welfare: Support for Government Welfare Reform', in Curtice, J., Phillips, M. and Clery E. (2015) *British Social Attitudes: the 33rd Report*, London: NatCen Social Research, pp. 23-44.

Coats, D., Johnson, N. and Hackett, P. (2012) From the Poor Law to Welfare to Work: What have we learned from a century of anti-poverty policies? London: The Smith Institute.

Cochrane, A., Clarke, J. and Gewirtz, S. (2001) 'Comparing welfare states', in Cochrane, A., Clarke, J. and Gewirtz, S. (eds.), *Comparing Welfare States* (2nd edition), London: Sage, pp. 1-28.

Code, L. (1981) 'Is the Sex of the Knower Epistemologically Significant?', *Metaphilosophy,* 12(3-4), pp. 267-276.

Collins, P. H. (1990). Black feminist thought: Knowledge, consciousness and the politics of empowerment. Boston, MA: Unwin Hyman.

Cooper, V. and Whyte, D. (2017a) *The Violence of Austerity*. London: Pluto Press.

Cooper, V. and Whyte, D. (2017b) 'Introduction: The Violence of Austerity', in Cooper, V. and Whyte, D. (eds.) *The Violence of Austerity*. London: Pluto Press, pp. 1-31.

Corden, A. (1995). Changing Perspectives on Benefit Take-Up. Social Policy Research Unit, University of York. London: HMSO

Corrigan, P.W., Larson, J. E. and Rüsch, N. (2009) 'Self-Stigma and the "Why Try" Effect: Impact on Life Goals and Evidence-Based Practices', *World Psychiatry*, 8(2), pp. 75–81.

Cox, R. H. (1998) 'The consequences of welfare reform: How conceptions of social rights are changing', *Journal of Social Policy*, 27(1), pp. 1-16.

Craig, P. (1991) 'Costs and Benefits: A Review of Research on Take-up of Income-Related Benefits', *Journal of Social Policy*, 20(4), pp. 537–565.

Crenshaw, K. (1989) ‘Demarginalizing the intersection of race and sex: A Black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics’, *University of Chicago Legal Forum*, 1989(8), pp.139-167.

Crocker, J., Major, B. and Steele, C. (1998) ‘Social Stigma’, in Gilbert, D. and Fiske, S. (eds.) *Handbook of Social Psychology*, New York: Oxford University Press, pp. 504-508.

Daguerre, A. and Etherington, D. (2014) Workfare in 21st century Britain: the erosion of rights to social assistance. London: Middlesex University.

Daly, M. (2000) ‘Feminist Research Methodology: The Case of Ireland’, in Byrne, A. and Lentin, R. (eds.), *(Re)searching Women: Feminist Research Methodologies in the Social Sciences in Ireland*, Dublin: Institute of Public Administration, pp. 60-72.

Davies, B. (1978) Universality, selectivity, and effectiveness in social policy. London: Heinemann Educational Books.

Davis, A. Y. (1981) *Women, race and class*. New York: Vintage Books.

Deacon, H. and Stephney, I. (2007) *HIV/AIDS, Stigma and Children: A Literature Review*. Cape Town: HSRC Press.

Dean, H. (2012) 'The Ethical Deficit of the United Kingdom's Proposed Universal Credit: Pimping the Precariat?', *The Political Quarterly*, 83(2), pp. 353-359.

De Benedictis, S., Allen, K. and Jensen, T. (2017) ‘Portraying Poverty: The Economics and Ethics of Factual Welfare Television’, *Cultural Sociology*, 11(3), pp. 337–358.

Doucet, A. and Mauthner, N.S. (2007) 'Feminist methodologies and epistemology', in Bryant, C.D. and Peck, D.L. (eds.), *21st Century Sociology: A Reference Handbook* (Volume 2), California: Sage, pp. 36-42.

Dugan, E. (2014) ‘Benefit Changes mean a Choice of ‘Eat or Heat’ for an Increasing Number of Families’, *The Independent*, 23 November. Available at: http://www.independent.co.uk/life-style/health-and-families/health-news/benefit-changes-mean-a-choice-of-eat-or-heat-for-an-increasing-number-of-families-9877801.html (Accessed: 13 March 2017).

Duncan Smith, I. (2011) Iain Duncan Smith, Speech to Conservative Party conference, *Politics.co.uk*, 3 October. Available at: http://www.politics.co.uk/comment-analysis/2011/10/03/iain-duncan-smith-speech-in-full (Accessed: 15 April 2017).

Duncan Smith, I. (2014) 'A Welfare State Fit for the 21st Century', Centre for Social Justice, London. *Gov.uk*, 23 January. Available at: https://www.gov.uk/government/speeches/a-welfare-state-fit-for-the-21st-century (Accessed: 15 April 2017).

DWP (2017) Press release: Universal Credit – payments and labour market reports published, *Gov.uk*, 15 September. Available at: https://www.gov.uk/government/news/universal-credit-payments-and-labour-market-reports-published (Accessed: 2 June 2020).

Dwyer, P. (2004) 'Creeping Conditionality in the UK: From Welfare Rights to Conditional Entitlements?', *The Canadian Journal of Sociology*, 29(2), pp. 265-287.

Dwyer, P. and Wright, S, (2014) 'Universal Credit, ubiquitous conditionality and its implications for social citizenship', *Journal of Poverty and Social Justice*, 22(1), pp. 27-35.

Dwyer, P. and Patrick, R. (2020) 'Little and large: methodological reflections from two qualitative longitudinal policy studies on welfare conditionality', *Longitudinal and Life Course Studies*, 12(1), pp. 63-8.

Dwyer, P., Scullion, L., Jones, K., McNeill, J., Stewart, A. B. R. (2020) 'Work, welfare, and wellbeing: The impacts of welfare conditionality on people with mental health impairments in the UK', *Social Policy Administration*, 54, pp. 311-326.

Elward, L. (2016) Corporate Welfare Crime: two case studies in state-corporate harm, MA Dissertation, University of Liverpool.

Emmel, N.D., Hughes, K., Greenhalgh, J. and Sales, A. (2007) 'Accessing Socially Excluded People — Trust and the Gatekeeper in the Researcher-Participant Relationship', *Sociological Research Online*, 12(2), pp. 43-55.

English Indices of Deprivation (2015) *English indices of deprivation 2015*. Available at: http://imd-by-postcode.opendatacommunities.org/ (Accessed: 24 October 2018).

Esping-Andersen, G. (1990) *The Three Worlds of Welfare Capitalism*. Cambridge: Polity Press.

Esping-Andersen, G. (1996) Welfare States in Transition: National Adaptations in Global Economies. London: Sage Publications.

Esping-Andersen, G. (2000) A Welfare State for the 21st Century: Ageing Societies, Knowledge-Based Economies and the Sustainability of European Welfare States, Report to the Portuguese Presidency of the European Union, prepared for the Lisbon Summit, March

2000. Available at: http://lege.net/nnn.se/seminar/pdf/report.pdf (Accessed: 10 November 2017).

Evans, M. (2016) 'Women and the politics of austerity: new forms of respectability', *British Politics*, 11(4), pp. 438-451.

Everett, B. (2004) 'Best Practices in Workplace Mental Health: An Area for Expanded Research', *HealthcarePapers*, 5(2), pp. 114-16.

Fawcett Society (2020) *Women almost twice as likely as men to do the bulk of household budgeting*, 25 June. Available at: https://www.fawcettsociety.org.uk/news/women-almost-twice-as-likely-as-men-to-do-the-bulk-of-household-budgeting (Accessed: 30 July 2020).

Finn, D., Mason, D., Rahim, N. and Casebourne, J. (2008) *Problems in the delivery of benefits, tax credits and employment services*. York: Joseph Rowntree Foundation

Fletcher, D.R. (2015). 'Workfare – a Blast from the Past? Contemporary Work Conditionality for the Unemployed in Historical Perspective', *Social Policy and Society*, 14, pp. 329-339.

Fohrbeck, A., Hirseland, A. and Lobato, P.R. (2014) 'How benefits recipients perceive themselves through the lens of the mass media - some observations from Germany', *Sociological Research Online*, 19(4), pp. 74–81.

Folbre, N. (1994) Who Pays for the Kids? Gender and the Structures of Constraint. London: Routledge.

Fonow, M.M. and Cook, J.A. (1991a) *Beyond Methodology: Feminist Scholarship as Lived Research*. Bloomington: Indiana University Press.

Fonow, M.M. and Cook, J.A. (1991b) 'Back to the Future: A Look at the Second Wave of Feminist Epistemology and Methodology', in Fonow, M.M. and Cook, J.A. (eds.) *Beyond Methodology: Feminist Scholarship as Lived Research*. Bloomington: Indiana University Press, pp. 1-15.

Foucault, M. (1977) *Discipline and Punish: The Birth of the Prison*, trans. Alan Sheridan. London: Allen Lane.

Francis-Devine, B. (2021) 'How has the coronavirus pandemic affected women in work?', *House of Commons Library*, 8 March. Available at: https://commonslibrary.parliament.uk/how-has-the-coronavirus-pandemic-affected-women-in-work/ (Accessed: 20 May 2021).

Fraser, D. (2009) *The Evolution of the British Welfare State*. Basingstoke: Palgrave Macmillan.

Fraser, N. (1994) 'After the Family Wage: Gender Equity and the Welfare State', *Political Theory*, 22(4), pp. 591-618.

Garthwaite, K. (2016). *Hunger Pains: Life inside Foodbank Britain*. Bristol: The Policy Press.

Gates, S., Gogescu, F., Grollman, C., Cooper, E., Khambhaita, P. (2019) *Transport and inequality: An evidence review for the Department for Transport*. London: NatCen Social Research .

George, V. and Wilding, P. (1975) 'Social Values, Social Class and Social Policy', *Journal of Social Policy*, 4(4), pp. 373-390.

Giddens, A. (1998) The Third Way: The Renewal of Social Democracy. Cambridge: Polity Press.

Gingerbread (2019) *Single parents: facts and figures*. Available at: https://www.gingerbread.org.uk/policy-campaigns/publications-index/statistics/ (Accessed: 1 October 2019).

Glendinning, C. and Millar, J. (eds.) (1987) *Women and Poverty in Britain*. Brighton: Harvester/Wheatsheaf.

Glennerster, H. (1995) *British Social Policy Since 1945*. Oxford: Blackwell.

Goffman, E. (1959) *The Presentation of Self in Everyday Life*. New York: Doubleday.

Goffman, E. (1961) Asylums: Essays on the Social Situation of Mental Patients and Other Inmates. Chicago: Aldine.

Goffman, E. (1963) *Stigma: Notes on the Management of Spoiled Identity*. Englewood Cliffs, N.J.: Prentice-Hall.

Goffman, E. (1967) Interaction Ritual: Essays on Face-to-Face Behaviour. New York: Doubleday.

Goldberg, G. and Kremen, E. (1990) *The Feminization of Poverty: Only in America?* New York: Praeger.

Golding, P. and Middleton, S. (1982) *Images of Welfare: Press and Public Attitudes to Poverty*. Oxford: Blackwell.

Goode, S. (2000) 'Researching a hard-to-access and vulnerable population: Some considerations on researching drug and alcohol-using mothers', *Sociological Research Online*, 5(1), pp. 61–73.

Gordon, D. (2011) Social Mobility and Child Poverty Review: Consultation Response, *Poverty and Social Exclusion*. Available at: https://www.poverty.ac.uk/working-papers-policy-response-social-mobility-life-chances-children-parenting-families-uk/social.

Gough, J., Eisenschitz, A. and McCulloch, A., (2006) *Spaces of Exclusion*. London: Routledge.

Gov.scot.uk (2022) *Policy: Social security*, Available at: https://www.gov.scot/policies/social-security/ (Accessed: 26 February 2022).

Gov.uk (2021a) *Personal Independence Payment: Official Statistics to October 2021*, 14 December. Available at: https://www.gov.uk/government/statistics/personal-independence-payment-statistics-to-october-2021/personal-independence-payment-official-statistics-to-october-2021 (Accessed: 1 February 2022).

Gov.uk (2018) *Universal Credit.* Available at: https://www.gov.uk/universal-credit/eligibility (Accessed: 24 October 2018).

Gov.uk (2021b) *Universal Credit: How you're paid*, Available at: https://www.gov.uk/universal-credit/how-youre-paid (Accessed: 1 February 2022).

Gov.uk (2022) *Employment and Support Allowance (ESA)*, Available at: https://www.gov.uk/employment-support-allowance (Accessed 1 February 2022).

Gray, D. (2002) '"Everybody just freezes. Everybody is just embarrassed": Felt and enacted stigma among parents of children with high functioning Autism', *Sociology of Health and Illness*, 24(6), pp. 734–49.

Greener, I. (2011) Designing Social Research: A Guide for the Bewildered. London: Sage.

Greer-Murphy, A.A. (2018) Invisible Inequalities of Austerity: Everyday Life, Mothers and Health in Stockton-on-Tees. Doctoral thesis, Durham University.

Griffiths, R. (2017) '"No Love on the Dole: The Influence of the UK Means-tested Welfare System on Partnering and Family Structure," *Journal of Social Policy*, 46(3), pp. 543–561.

Griffiths, R. (2018) 'Universal Credit, Women and Gender Equality: A Retrograde Step?', *IPR Blog*. Available from: https://blogs.bath.ac.uk/iprblog/2018/09/19/universal-credit-women-and-gender-equality-a-retrograde-step/ (Accessed: 10 February 2019).

Grover, C. (2019) 'Violent proletarianisation: Social murder, the reserve army of labour and social security "austerity" in Britain', *Critical Social Policy*, 39(3), pp. 335–355.

Gubrium, J. F. and Holstein, J. A. (1997) *The New Language of Qualitative Method.* Oxford: Oxford University Press.

Hakim, C. (1980) 'Census reports as documentary evidence: the Census commentaries 1801–1951', *The Sociological Review*, 28(3), pp. 551–80.

Hall, S-M., McIntosh, K., Neitzert, E., Pottinger, L., Sandhu, K., Stephenson, M-A., Reed, H., and Taylor, L. (2017) *Intersecting Inequalities: the impact of austerity on Black and Minority Ethnic Women in the UK,* Women's Budget Group and Runnymede Trust. Available at: https://wbg.org.uk/wp-content/uploads/2018/08/Intersecting-Inequalities-October-2017-Full-Report.pdf (Accessed: 1 February 2018).

Hamilton, K. (2012) 'Low-income families and coping through brands', *Sociology*, 46(1), pp. 74-90.

Hammond, J.L. and Hammond, B. (1930) *The Age of the Chartists*. London: Longmans Green.

Hancock, A-M. (2004) The Politics of Disgust: The Public Identity of the Welfare Queen. New York: New York University Press.

Hancock, L. and Mooney, G. (2012a) '"Welfare Ghettos" and the "Broken Society": Territorial Stigmatisation in the Contemporary UK', *Housing, Theory and Society*, 30(1), pp. 46–64.

Hancock, L. and Mooney, G. (2012b) 'Beyond the Penal State: Advanced Marginality, Social Policy and Anti-Welfarism', in Squires, P. and Lea, J. (eds.) *Criminalisation and Advanced Marginality: Critically Exploring the Work of Loïc Wacquant.* Bristol: Policy Press, pp. 107-128.

Haraway, D. (1988) 'Situated Knowledges: The Science Question in Feminism and the Privilege of Partial Perspective', *Feminist Studies*, 14(3), pp. 575-599.

Harding, S. G. (1987a) *The Science Question in Feminism.* Ithaca, NY: Cornell University Press.

Harding, S.G. (1987b) 'Introduction: Is there a Feminist Method?', in Harding, S. (ed.) *Feminism and Methodology.* Milton Keynes: Open University Press, pp. 1-14.

Harding, S.G. (1991) *Whose Science? Whose Knowledge?: Thinking from Women's Lives*. Ithaca, NY: Cornell University Press.

Harding, S.G. (2004) 'Introduction: Standpoint Theory as a Site of Political, Philosophic, and Scientific Debate', in Harding, S.G. (ed.) *The Feminist Standpoint Theory Reader Intellectual and Political Controversies*. London: Routledge, pp. 1-32.

Harding, S. (2020) *The Impact of Universal Credit on Women*. Belfast: Women's Regional Consortium. Available at: https://womensregionalconsortiumni.org.uk/wp-content/uploads/2021/04/September-2020-The-Impact-of-Universal-Credit-on-Women.pdf.

Harris, B. (2004) The Origins of the British Welfare State: Society, State and Social Welfare in England and Wales 1800-1945. Basingstoke: Palgrave Macmillan

Hartsock, N. (1987) 'The Feminist Standpoint: Developing the Ground for a Specifically Feminist Historical Materialism', in Harding, S. (ed.) *Feminism and Methodology: Social Science Issues.* Bloomington: Indiana University Press, pp. 157-180.

Harvey, D. (2005) *A Brief History of. Neoliberalism*. Oxford University. Press.

Hastings, A. (2004) 'Stigma and Social Housing Estates: Beyond Pathological Explanations', *Journal of Housing and the Build Environment*, 19(3), pp. 233-254.

Hatzenbuehler, M.L., Phelan, J.C. and Link, B.G. (2013) 'Stigma as a Fundamental Cause of Population Health Inequalities', *American Journal of Public Health*, 103(5), pp. 813-21.

Hathaway, K.B. (1943) *The Little Locksmith.* New York: Coward-McCann.

Haux, T. and Whitworth, A. (2014) 'Lone parent obligations towards paid work: Misadventure and misdirection in UK policy making', *Discover Society*, 30 September. Available at: https://archive.discoversociety.org/2014/09/30/lone-parent-obligations-towards-paid-work-misadventure-and-misdirection-in-uk-policy-making/# (Accessed: 2 November 2016).

Hay, J.R. (1975) The Origins of the Liberal Welfare Reforms 1906-1914. London: Macmillan.

Heclo, H. (1980) 'Welfare: progress and stagnation', in Gwyn, W. and Rose, R. (eds.) *Britain: Progress and decline*. Basingstoke: Macmillan, pp. 39-59.

Hobson, B. (1994) 'Solo Mothers, Social Policy Regimes and the Logics of Gender', in Sainsbury, D. (ed.) *Gendering Welfare States*, London: Sage, pp. 170-87.

Hooper, C-A., Gorin, S., Cabral, C. and Dyson, C. (2007) *Living with hardship 24/7: the diverse experiences of families in poverty in England*. London: The Frank Buttle Trust.

Hobson, F. (2020) *The aims of ten years of welfare reform (2010-2020)* (House of Commons Library Briefing Paper 9090). Available at: https://researchbriefings.files.parliament.uk/documents/CBP-9090/CBP-9090.pdf (Accessed: 5 January 2021).

House of Commons Work and Pensions Committee (2016) *The future of Jobcentre Plus* Available at: https://publications.parliament.uk/pa/cm201617/cmselect/cmworpen/57/5705.htm (Accessed: 5 March 2019).

House of Commons Work and Pensions Committee (2018) *Universal Credit and domestic abuse*, 1 August. Available at: https://publications.parliament.uk/pa/cm201719/cmselect/cmworpen/1166/1166.pdf (Accessed: 10 December 2019).

House of Commons Work and Pensions Committee (2019) *The two-child limit*, 3 November. Available at: https://publications.parliament.uk/pa/cm201919/cmselect/cmworpen/51/51.pdf (Accessed: 10 December 2020).

Hudson-Sharp, N., Munro-Lott, N., Rolfe, H. and Runge, J. (2018) *The impact of welfare reform and welfare-to-work programmes: An evidence review*. Manchester: Equality and Human Rights Commission.

I, Daniel Blake (2016) Directed by K. Loach [Feature film]. London: BFI.

Jensen, T. (2014) 'Welfare Commonsense, Poverty Porn and Doxosophy', *Sociological Research Online*, 19(3), pp. 277–283.

Jensen, T. (2018) Parenting the Crisis: the cultural politics of parent-blame. Bristol: The Policy Press.

Jensen, T. and Tyler, I. (2015). ‘‘Benefit Broods’: The Cultural and Political Crafting of Anti-Welfare Commonsense’, *Critical Social Policy*, 35(4), pp. 470-491.

Jensen, T., Allen, K., De Benedictis, S., Garthwaite, K. and Patrick, R. (2019) ‘Welfare imaginaries at the interregnum’, *Soundings*, 72(72), pp. 79-89.

Johnsen, S. (2016) *First Wave Findings: lone parents*. York: University of York.

Johnson, N. (1990) Reconstructing the Welfare State: A Decade of Change 1980-1990. Hertfordshire: Harvester Wheatsheaf.

Jordan, J.D. (2014) ‘The Rage of Well-fed Lions: The Economic Foundations of UK Welfare Claimant Demonisation in the Neoliberal Era’, *French Journal of British Studies*,19(1), pp. 215-248.

Kamerman, S.B. (1986) ‘Women, Children, and Poverty Public Policies and Female-Headed Families in Industrialized Countries’, in Gelpi, B., Hartsock, N., Novak, C. and Strober, M. (eds.), *Women and Poverty*. Chicago: Chicago University Press, pp. 41-64

Kelvin, P. and Jarrett, J. (1985). *Unemployment: Its social and psychological effects.* Cambridge: Cambridge University Press.

King, N. and Horrocks, C. (2010) *Interviews in Qualitative Research*. London: Sage.

Kolberg, J. E. (1991) ‘The gender dimension of the Welfare State’, *International Journal of Sociology*, 21(2), pp. 119-148.

Kusow, A.M. (2004) ‘Contesting Stigma: On Goffman’s Assumptions of Normative Order’, *Symbolic Interaction*, 27(2), pp. 179-97.

Kvale, S. (1996) InterViews: An Introduction to Qualitative Research. California: Sage.

Langan, M., and Ostner, I. (1991). ‘Gender and Welfare: Towards a Comparative Framework’, in Room, G. (ed.) *Towards a European Welfare State*. Bristol: School for Advanced Urban Studies, pp. 127-50.

Lansley, S. and Mack, J. (2013) ‘A more unequal country?’, *Poverty and social exclusion*, 16 April. Available at: https://www.poverty.ac.uk/editorial/more-unequal-country (Accessed 10 January 2017).

Lakhani, B. (2011) 'Lone parents and access to means-tested benefits', *CPAG* http://www.cpag.org.uk/content/lone-parents-and-access-means-tested-benefits (Accessed: 15 November 2016).

Lee, S. (2021) 'Boris Johnson has ended the age of austerity - but his party isn't on board', *The Conversation*, 29 October. Available at: https://theconversation.com/boris-johnson-has-ended-the-age-of-austerity-but-his-party-isnt-on-board-170751 (Accessed 29 October 2021).

Legislation.gov.uk (2012) *Welfare Reform Act 2012*. Available at: http://www.legislation.gov.uk/ukpga/2012/5/contents. (Accessed: 15 May 2016).

Legislation.gov.uk (2016) *Welfare Reform and Work Act* 2016. Available at: http://www.legislation.gov.uk/ukpga/2016/7/contents/enacted/data.htm. (Accessed: 15 May 2017).

Leigh Day (2021) *Conclusion of inquest into death of Philippa Day*, 27 January. Available at: https://www.leighday.co.uk/latest-updates/news/2021-news/conclusion-of-inquest-into-death-of-philippa-day/ (Accessed: 10 December 2021).

Levitas, R. (2005) *The Inclusive Society: Social Exclusion and New Labour* (2nd edition). Basingstoke: Palgrave Macmillan.

Lewis, J. (1992) 'Gender and the Development of Welfare Regimes', *Journal of European Social Policy*, 2(3), pp. 159-73.

Lewis, J. (1997) 'Gender and Welfare Regimes: Further Thoughts', *Social Politics: International Studies in Gender, State & Society*, 4(12), pp. 160-177

Link, B.G. (1987) 'Understanding Labelling Effects in the Area of Mental Health Disorders: An Assessment of the Effects of Expectations of Rejection', *American Sociological Review*, 52, pp. 96-112.

Link, B.G. and Phelan, J.C. (2001) 'Conceptualizing Stigma', *Annual Review of Sociology*, 27, pp. 363-85.

Link, B.G. and Phelan, J.C. (2014) 'Mental Illness Stigma and the Sociology of Mental Health', in Johnson, R.J., Turner, R.J. and Link, B.G. (eds.) *Sociology of Mental Health: Selected Topics from Forty Years 1970s–2010s*. New York: Springer, pp. 75-100.

Lister, R. (2000) 'Gender and the Analysis of Social Policy' *in* Lewis, G., Gewirtz, S. and Clarke, J., *Rethinking Social Policy*. London: Sage, pp. 22-36.

Lister, R. (2003) *Citizenship: Feminist Perspectives* (2nd edition). Basingstoke: Palgrave Macmillan.

Lister, R. (2004) *Poverty*. Cambridge: Polity Press.

Lister, R. (2015) '"To count for nothing": Poverty beyond the statistics', British Academy Lecture, 5 February, *Journal of the British Academy*, 3, pp. 139-165

Lister, R. (2017) 'Foreword', *in* Patrick, R. *For Whose Benefit? The Everyday Realities of Welfare Reform*. Bristol: Policy Press, pp. xi-xiv.

Love Productions (2014) *Benefits Street Series 1*. Available at: http://www.loveproductions.co.uk/node/172 (Accessed: 2 November 2016).

Lovett, W. (1856) *Woman's Mission*. London: Simpkin, Marshall.

MacDonald, R., Shildrick, T., & Furlong, A. (2014). 'In search of "intergenerational cultures of worklessness": Hunting the Yeti and shooting zombies', *Critical Social Policy*, 34(2), pp. 199-220.

Maguire, M. and Delahunt, B. (2017) 'Doing a thematic analysis: A practical, step-by-step guide for learning and teaching scholars', *All Ireland Journal of Higher Education*, 9(3), pp. 1-14.

Manji, A. (2020) People not tick boxes: A call to rebuild the disability benefits system. London: Mind.

Mann, K. and Roseneil, S. (1994) '"Some mothers do 'ave 'em": Backlash and the gender politics of the underclass debate', *Journal of Gender Studies*, 3(3), pp. 317-331.

Manzo. J.F. (2004) 'On the Sociology and Social Organization of Stigma: Some Ethnomethodological Insights', *Human Studies*, 27, pp. 401-16.

Marsden, D. (1969) Mothers Alone: Poverty and the fatherless family. London: Penguin.

Marsh, D. (1980) *The Welfare State*. London: Longman.

Marshall, T.H. (1950) *Citizenship and Social Class*. Cambridge: Cambridge University Press.

Mason, J. (2018) *Qualitative Researching* (3rd edition). London: Sage.

McDonald, C. and Marston, G. (2005). 'Workfare as Welfare: Governing Unemployment in the Advanced Liberal State', *Critical Social Policy*, 25(3), pp. 374-401.

McKenzie, L. (2015). Getting By: Estates, Class and Culture in Austerity Britain. Bristol: The Policy Press

MacRae, H. (1999) 'Managing Courtesy Stigma: The Case of Alzheimer's Disease', *Sociology of Health & Illness*, 21, pp. 54-70.

Meek, J. (2016) 'Robin Hood in a Time of Austerity', *London Review of Books*, 38(4), pp. 3-8.

Millar, J. (2007) 'The dynamics of poverty and employment: the contribution of qualitative longitudinal research to understanding transitions, adaptations and trajectories', *Social Policy and Society*, 6(4), pp. 533-544.

Millar, J. and Bennett, F. (2017) "Universal Credit: Assumptions, Contradictions and Virtual Reality," Social Policy and Society. Cambridge University Press, 16(2), pp. 169-182.

Millar, J. and Ridge, T. (2017*) Work and relationships over time in lone-mother families*. York: Joseph Rowntree Foundation.

Millar, J. and Ridge, T. (2018) 'No margin for error: fifteen years in the working lives of lone mothers and their children', *Journal of Social Policy*, 49(1), pp. 1-17.

Mills, C. (2018) '"Dead people don't claim": A psychopolitical autopsy of UK austerity suicides', *Critical Social Policy*, 38(2), pp. 302-322.

Mills, C. (2021) 'For as long as the DWP has been killing people, disabled activists have been fighting back', *Novara Media*, 26 November. Available at: https://novaramedia.com/2021/11/26/for-as-long-as-the-dwp-has-been-killing-people-disabled-activists-have-been-fighting-back/ (Accessed: 4 December 2021).

Ministry of Justice (2019) *Tribunal Statistics Quarterly, April to June 2019*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/830965/Tribunal_and_GRC_statistics_Q1_201920.pdf (Accessed: 10 November 2020).

Minogue, M. (1998) 'Changing the state: Concepts and practice in the reform of the public sector', in Minogue, M., Polidano, C. and Hulme, D. (eds.) *Beyond the New Public Management: Changing ideas and practices in governance*. Cheltenham: Edward Elgar, pp.17-37.

Mood, C. (2006) ‘Take-up down under: Hits and Misses of Means-Tested Benefits in Australia’, *European Sociological Review*, 22(4), pp. 443-458.

Morris, L. (1990) The Workings of the Household: A US-UK Comparison. Cambridge: Polity Press.

Motability (2018) *Letter from chairman to Secretary of State for Work and Pensions, Rt Hon Esther McVey, MP*, 15 February. Available at: https://www.motabilityoperations.co.uk/Motability_Letter_to_SoS_Thursday_15th_February_2018.pdf (Accessed: 15 June 2020).

Murray, C. (1984) *Losing Ground.* New York: Basic Books.

Murray, C. (1990) *The Emerging British Underclass*. London: Institute of Economic Affairs.

National Audit Office (2016) ‘Benefit Sanctions’, *Department for Work and Pensions*, HC628 Session 2016-17, 30 November. Available at: https://www.nao.org.uk/wp-content/uploads/2016/11/Benefit-sanctions.pdf (Accessed: 5 May 2017).

Nyblade, L., Pande, R., Mathur, S., MacQuarrie, K., Kidd, R., Banteyerga, H., Kidanu, A., Kilonzo, G., Mbwambo, J. and Bond, V. (2003) *Disentangling HIV and AIDS stigma*. Washington DC: International Center for Research on Women.

Oakley, A. (1974) *The Sociology of Housework*. Oxford: Martin Robertson.

Oakley, A. (1981) ‘Interviewing Women: a contradiction in terms', in Roberts, H. (ed.), *Doing feminist research*. London: Routledge & Kegan Paul, pp. 30-61.

O’Connor, J. (1993). ‘Gender, Class and Citizenship in the Comparative Analysis of Welfare Regimes: Theoretical and Methodological Issues’ *British Journal of Sociology*, 44(3), pp. 501-18.

O’Connor, J. (1996) ‘From Women in the Welfare State to Gendering Welfare State Regimes’, *Current Sociology*, 44(2), pp. 1-30.

OECD (2021) *Caregiving in Crisis: Gender inequality in paid and unpaid work during COVID-19*, 13 December. Available at: https://www.oecd.org/coronavirus/policy-responses/caregiving-in-crisis-gender-inequality-in-paid-and-unpaid-work-during-covid-19-3555d164/ (Accessed: 04 February 2022).

O'Grady, T. (2017) 'How politicians created, rather than reacted to, negative public opinion on benefits', *LSE Blogs*, 7 November. Available at: https://blogs.lse.ac.uk/politicsandpolicy/public-opinion-towards-welfare/ (Accessed: 8 November 2017).

O'Hara, M. (2014) Austerity Bites: a journey to the sharp end of cuts in the UK. Bristol: Policy Press.

Oliver, M. (1990) *The politics of disablement*. Basingstoke: Macmillan.

ONS (2013) *Women in the labour market: 2013*, 25 September. Available at: https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/articles/womeninthelabourmarket/2013-09-25 (Accessed: 1 November 2016).

ONS (2016) 'Women shoulder the responsibility of 'unpaid work'', 10 November. Available at: https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/earningsandworkinghours/articles/womenshouldertheresponsibilityofunpaidwork/2016-11-10 (Accessed: 12 March 2018).

ONS (2017) *Research report on population estimates by characteristics*. Available at: https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/methodologies/researchreportonpopulationestimatesbycharacteristics (Accessed: 4 December 2020).

ONS (2021) *Gender pay gap in the UK: 2021*. Available at: https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/earningsandworkinghours/bulletins/genderpaygapintheuk/2021 (Accessed: 17 November 2021).

Orloff, A. (1993) 'Gender and the Social Rights of Citizenship: The Comparative Analysis of Gender Relations and Welfare States', *American Sociological Review*, 58(3), pp. 303-328.

Orloff, A. (1996) 'Gender in the Welfare State', *Annual Review of Sociology*,.22, pp. .51–78.

Osborne, G. (2012) 'Keynote Speech: Conservative 2012 Party Conference', Birmingham. *New Statesman*, 8 October. Available at: http://www.newstatesman.com/politics/staggers/2016/08/ =labour-donor-rebel-mps-should-return-shadow-cabinet (Accessed: 4 April 2017).

Osborne, G. (2013) 'Chancellor's speech on changes to the tax and benefit system', *Gov*.uk, 2 April. Available at: https://www.gov.uk/government/speeches/chancellor-speech-on-changes-to-the-tax-and-benefit-system (Accessed: 10 October 2016).

Page, R. (1984) *Stigma*. London: Routledge & Kegan Paul

Park, K. (2002) 'Stigma management among the voluntarily childless', *Sociological Perspectives*, 45, pp. 21–45

Parker, R. and Aggleton, P. (2003) 'HIV and AIDS-related stigma and discrimination: a conceptual framework and implications for action', *Social Science and Medicine*, 57, pp. 13-24.

Partington, R. (2018) 'Mothers working part-time hit hard by gender pay gap, study shows' *The Guardian*, 5 February. Available at: https://www.theguardian.com/society/2018/feb/05/mothers-working-part-time-hit-hard-by-gender-pay-gap-study-shows (Accessed: 13 March 2018).

Patrick, R. (2016) 'Living with and responding to the "scrounger" narrative in the UK: exploring everyday strategies of acceptance, resistance and deflection', *Journal of Poverty and Social Justice*, 24(3), pp. 245-259.

Patrick, R. (2017a) For Whose Benefit? The Everyday Realities of Welfare Reform. Bristol: The Policy Press.

Patrick, R. (2017b) ''Poverty porn' blights the lives of people claiming benefits', *The Guardian*, 13 February. Available at: https://www.theguardian.com/society/2017/feb/13/poverty-porn-blights-the-lives-of-people-claiming-benefits?CMP=share_btn_tw (Accessed: 1 May 2017).

Patrick, R. (2017c) 'Why conditionality isn't working', *Welfare Conditionality*, 23 October. Available at: http://www.welfareconditionality.ac.uk/2017/10/why-conditionality-isnt-working/ (Accessed: 25 October 2017)

Patrick, R. (2020) 'Covid has exposed the decade-long lie that benefits are a lifestyle choice', *The Guardian*, 3 November. Available at: https://www.theguardian.com/society/2020/nov/03/covid-decade-long-lie-benefits-lifestyle-choice-george-osborne-free-school-meals (Accessed: 3 November 2020)

Patrick, R., Garthwaite, K., Power, M., Kaufman, J., Page, G., Pybus, K., Warnock, R., Aldridge, H., Flew, L., Lee, T. and Howes, S. (2022) *Covid Realities: Documenting life on a low income during the pandemic*. London: The Nuffield Foundation.

Peacock, M. (2012) 'Women's experiences of living in an unequal society: the place of shame, social comparison, and neoliberal discourses in explanations of inequalities in health', *The Lancet*, 280(s63), p. 1.

Pemberton, S., Fahmy, E. Sutton, E. and Bell, K. (2016) 'Navigating the stigmatised identities of poverty in austere times: Resisting and responding to narratives of personal failure', *Critical Social Policy*, 36(1), pp. 21–37.

Perez, C. (2014) 'Revisiting Erving Goffman's Stigma: Notes on the Management of Spoiled Identity', *Social Analysis of Health Network*, 1 July. Available at: https://sahncambridge.wordpress.com/2014/07/01/revisiting-erving-goffmans-stigma-notes-on-the-management-of-spoiled-identity-by-cristina-perez/ (Accessed: 12 January 2017).

Pescosolido, B.A. and Martin, J.K. (2015) 'The Stigma Complex', *Annual Review of Sociology*, 41, pp. 87-116.

Phoenix, A. (1994) 'Practising Feminist Research: The Intersection of Gender and "Race" in the Research Process', in M. Maynard and Purvis, J. (eds.), *Researching Women's Lives from a Feminist Perspective*. London: Taylor and Francis, pp. 49-71.

Pierson, C. and Leimgruber, M. (2010) 'Intellectual roots', in Castles, C.S., Leibfried, S., Lewis, J., Obinger, H. and Pierson, C. (eds.) *The Oxford handbook of the Welfare State*. Oxford: Oxford University Press, pp.32-44.

Piketty, T. (2014) *Capital in the twenty-first century*. Cambridge, MA: Harvard University Press.

Pinchbeck, I. (1969 [1930]) *Women and the Industrial Revolution, 1750–1880*. London: Frank Cass.

Pinker, R. (1970) 'Stigma and Social Welfare', *Social Work (1939-1970)*, 27(4), pp. 13-17.

Pinker, R. (1971) *Social Theory and Social Policy*. New Hampshire: Heinemann Educational Books.

Piven, F.F. (2010) 'A Response to Wacquant', *Theoretical Criminology*, 14(1), pp. 111-116.

Polanyi, K. (1944) *The Great Transformation*. New York: Rinehart.

Portes, J. (2015) Welfare savings and incapacity benefits, *National Institute of Economic and Social Research*, 16 April. Available at: https://www.niesr.ac.uk/blog/welfare-savings-and-incapacity-benefits (Accessed: 16 November 2017).

Prideaux, S. (2010) 'The welfare politics of Charles Murray are alive and well in the UK', *International Journal of Social Welfare*, 19, pp. 293-302.

Pring, J. (2017) 'Welfare Reforms and the Attack on Disabled People', in Cooper, V. and Whyte, D. (eds.) *The Violence of Austerity*. London: Pluto Press, pp. 51-58.

Pring, J. (2018) 'Motability row sparks anger and demand to use huge reserves to support customers', *Black Triangle Campaign*, 15 February. Available at: https://blacktrianglecampaign.org/2018/02/15/motability-row-sparks-anger-and-demand-to-use-huge-reserves-to-support-customers/ (Accessed: 12 November 2018).

Pryor, J.B. and Reeder, G.D. (2011) 'HIV-Related Stigma', in Hall, J.C., Hall, B.J. and Cockerell, C.J. (eds.), *HIV/AIDS in the Post-HAART Era: Manifestations, Treatment and Epidemiology*. Shelton, Ct.: PMPH-USA, pp. 790-806.

Ramazanoğlu, C. and Holland, J. (2002) *Feminist Methodology: Challenges and Choices.* London: Sage.

Reis, S. (2018a) 'The impact of austerity on women in the UK', *Women's Budget Group*. Available at: https://www.ohchr.org/Documents/Issues/Development/IEDebt/WomenAusterity/WBG.pdf (Accessed: 1 June 2018).

Reis, S. (2018b) 'The Female Face of Poverty: Examining the cause and consequences of economic deprivation for women', *Women's Budget Group*. Available at: https://wbg.org.uk/wp-content/uploads/2018/08/FINAL-Female-Face-of-Poverty.pdf (Accessed: 10 September 2018).

Reis, S. and De Henau, J. (2018) 'Disabled Women and Austerity', *Women's Budget Group*. Available at: https://wbg.org.uk/wp-content/uploads/2018/10/Disabled-women-October-2018-w-cover-2.pdf (Accessed: 2 February 2019).

Ridge, T. and Millar, J. (2008) *Work and well-being over time: lone mothers and their children*, Department for Work and Pensions Research Report No. 536. London: The Stationery Office.

Robson, C. (2011) *Real World Research* (3rd edition). West Sussex: John Wiley and Sons Ltd.

Roseneil, S. and Mann, K. (1996) 'Unpalatable choices and inadequate families: Lone mothers and the underclass debate', in Silva, E.B. (ed.) *Good enough mothering? Feminist perspectives on lone motherhood*. London: Routledge, pp. 191-210.

Roulston, K. (2014) 'Analysing Interviews', in Flick, U. (ed.) *The SAGE Handbook of Qualitative Data Analysis*. London: Sage, pp. 297-312.

Rowlingson, K. and McKay, S. (2002) *Lone parent families, gender, class and the state*. Harlow: Pearson Education Limited.

Rowntree, S.B. (1901). *Poverty, A Study of Town Life.* London: Longman.

Rowntree, S.B. (1941) Poverty and Progress: A Second Social Survey of York. London: Longman.

Royston, S. (2012) 'Understanding Universal Credit', *Journal of Poverty and Social Justice*, 20(1), pp. 69-86.

Ryan, F. (2017) 'I, Daniel Blake is a realistic depiction of life on benefits. Isn't it?', *The Guardian*, 16 February. Available at: https://www.theguardian.com/commentisfree/2017/feb/16/daniel-blake-realistic-life-benefits (Accessed: 20 February 2017).

Ryan, F. (2019) Crippled: Austerity and the Demonization of Disabled People. London: Verso.

Sainsbury, D. (1994) *Gendering Welfare States.* London: Sage.

Sainsbury, D. (1999) 'Introduction', in Sainsbury, D. (ed.) *Gender and Welfare State Regimes*. Oxford: Oxford University Press, pp. 1-11.

Savage, M., Silva, E. and Warde, A. (2010) 'Dis-identification and class identity', in Silva, E. and Warde, A. (eds.) *Cultural analysis and Bourdieu's legacy: settling accounts and developing alternatives*. London: Routledge, pp. 60-74.

Scambler, G. (1989) *Epilepsy*. London: Tavistock.

Scambler, G. (2004) 'Re-framing Stigma: Felt and Enacted Stigma and Challenges to the Sociology of Chronic and Disabling Conditions', *Social Theory and Health*, 2, pp. 29-46.

Scambler, G. (2009) 'Health-related stigma', *Sociology of Health Illness*, 31, pp. 441–55.

Scambler, G. (2012) 'Stigma and Mental Illness', *Society and the Human Condition*, 25 August. Available at: https://grahamscambler.wordpress.com/2012/10/30/stigma-and-mental-illness/. (Accessed: 20 December 2015).

Scambler, G. and Hopkins, A. (1986) 'Being Epileptic: Coming to Terms with Stigma', *Sociology of Health & Illness*, 8(1), pp. 26-43.

Scambler, G. and Paoli, F. (2008) ‘Health Work, Female Sex Workers and HIV/AIDS: Global and Local Dimensions of Stigma and Deviance as Barriers to Effective Interventions’, *Social Science and Medicine*, 66(8), pp. 1848-1862.

Schweyher, M., Gunhild, O. and Burrell, K. (2019) ‘Abuse or underuse? Polish migrants' narratives of (not) claiming social benefits in the UK in times of Brexit’, *Central and Eastern European Migration Review*, 8(2), pp. 1-22.

Seedat, S. and Rondon, M. (2021) ‘Women’s wellbeing and the burden of unpaid work’, *BMJ*, 374(n1972), pp. 1-3.

Shildrick, T. (2018) *Poverty Propaganda: Exploring the myths*. Bristol: Policy Press.

Shildrick, T., MacDonald, R., Webster, C. and Garthwaite, K. (2012) *Poverty and Insecurity: Life in Low-Pay, No-Pay Britain*. Bristol: Bristol University Press.

Shildrick, T. and MacDonald, R. (2013) ‘Poverty talk: how people experiencing poverty deny their poverty and why they blame “the poor”’, *The Sociological Review*, 61(2), pp,285–303.

Siim, B. (1987) ‘The Scandinavian Welfare States—Towards Sexual Equality or a New Kind of Male Domination?’, *Acta Sociologica*, 30(3/4), pp. 255-270.

Skeggs, B. (1994) ‘Situating the Production of Feminist Ethnography’, in Maynard, M. and Purvis, J. (eds.) *Researching Women’s Lives from a Feminist Perspective*. London, England: Taylor & Francis, pp. 72-92.

Skeggs, B. (1997) Formations of Class and Gender: Becoming Respectable. London: Sage.

Skeggs, B. (2011) ‘Imagining personhood differently: person value and autonomist working-class value practices’, *The Sociological Review*, 59(3), pp. 496–513.

Slater, T. (2012) 'The Myth of "Broken Britain": Welfare Reform and the Production of Ignorance', *Antipode*, 45, pp. 1-22.

Slater, T. (2015). Territorial Stigmatization: Symbolic Defamation and the Contemporary Metropolis’, in Hannigan, J. and Richards, G. (eds.) *The Handbook of New Urban Studies*. London: Sage, pp. 111-125.

Smelser, N. (1969) *Social Change in the Industrial Revolution.* London: Routledge & Kegan Paul.

Smith, D. (1979) ‘A sociology for women’, in Sherman, J.A. and Beck, E.T. (eds.) *The Prism of Sex*. Madison, WI: University of Wisconsin Press, pp. 135–187.

Smith, D. (1987) The Everyday World as Problematic: A Feminist Sociology. Toronto: University of Toronto Press.

Smith, D. (1991) ‘Writing Women’s Experience into Social Science’, *Feminism & Psychology*, 1(1), pp. 155–169.

Snow, D.A. and Anderson, L. (1987) ‘Identity Work among the Homeless: The Verbal Construction and Avowal of Personal Identities’, *American Journal of Sociology*, 92(6), pp. 1336-1371.

Song, M. (1996) ‘Changing conceptualisations of lone parenthood in Britain: Lone parents or single mums?’, *European Journal of Women's Studies*, 3(4), pp. 377-397.

Srivastava, P. and Hopwood, N. (2009) ‘A Practical Iterative Framework for Qualitative Data Analysis’, *International Journal of Qualitative Method*s, 8(1), pp. 76–84.

Spender, D. ([1980] 1990) *Man Made Language* (2nd edition). London: Pandora Press.

Spicker, P. (1984) *Stigma and social welfare*. London: Croom Helm.

Standing, K. (1998) ‘The Voices of the Less Powerful’, in Edwards, R. and Ribbens, J. (eds.) *Feminist Dilemmas in Qualitative Research: Public Knowledge and Private Lives*. London: Sage, pp. 186-202.

Stanley, L. and Wise, S. (1983) *Breaking Out: Feminist Consciousness and Feminist Research*. London: Routledge and Kegan Paul.

Stewart, H. (2017) ‘David Gauke signals he will press on with universal credit’, *The Guardian*, 25 August. Available at: https://www.theguardian.com/society/2017/aug/25/david-gauke-signals-he-will-press-on-with-universal-credit (Accessed: 25 August 2017).

Stewart, M. (2016) Cash Not Care: The Planned Demolition of the UK Welfare State. London: New Generation Publishing.

Stewart, M. (2018a) ‘State Crime by Proxy: Corporate influence on state sanctioned social harm’, *Journal of Critical Psychology, Counselling and Psychotherapy*, 18(4), pp. 217-227.

Stewart, M. (2018b) 'Charities are missing the point – disability benefit assessments were designed to fail', *TruePublica*, 10 July. Available at: https://truepublica.org.uk/united-kingdom/charities-are-missing-the-point-disability-benefit-assessments-were-designed-to-fail/ (Accessed: 12 September 2019).

Sullivan, E. (2020) 'Protecting against financial abuse', *Relate: The relationship people*, 21 May. Available at: https://planner.relate.org.uk/finances/managing-your-finances/protecting-against-financial-abuse (Accessed 16 July 2020).

Summers, K. and Young, D. (2020) 'Universal simplicity? The alleged simplicity of Universal Credit from administrative and claimant perspectives', *Journal of Poverty and Social Justice*, 28(2), pp. 169-186.

Taylor, Y. (2010) Classed intersections: spaces, selves, knowledges. Aldershot: Ashgate.

Taylor-Gooby, P. (1976), 'Rent benefits and tenants' attitudes: the Batley rent rebate and allowance study', *Journal of Social Policy*, 5(1), pp. 33–48.

Taylor-Gooby, P. (1991) 'Welfare State Regimes and Welfare Citizenship', *Journal of European Social Policy*, 1(2), pp. 93-105.

Taylor-Gooby, P. (2015). 'Bad News for the Poor: the British Social Attitudes Survey Shows a Hardening of Attitudes Towards Working Age Welfare Recipients', *London School of Economics*, 27 March. Available at: http://blogs.lse.ac.uk/politicsandpolicy/bad-news-for-the-poor/ (Accessed: 14 April 2016).

Titmuss, R.M. (1958) 'The Social Division of Welfare', in Titmuss, R. M. (ed.), *Essays on the Welfare State*. London: Allen and Unwin, pp. 34–55.

Thompson, E.P. (1968) *The Making of the English Working Class*. Harmondsworth: Penguin.

Thompson, W.E. and Harred, J.L. (1992) 'Topless Dancers: Managing Stigma in a Deviant Occupation', *Deviant Behavior*, 13(3), pp. 291–311.

Thompson, W.E., Harred, J.L. and Burks (2003) 'Managing the Stigma of Topless Dancing: a Decade Later', *Deviant Behavior*, 24(6), pp. 551-570

Travis, A. (2016) 'Are EU migrants really taking British jobs and pushing down wages?', *The Guardian*, 20 May. Available at: https://www.theguardian.com/politics/2016/may/20/reality-check-are-eu-migrants-really-taking-british-jobs (Accessed: 20 June 2020).

Trussell Trust (2019) *Five weeks is too long to wait for Universal Credit – Join the campaign*, 8 February. Available at: https://www.trusselltrust.org/2019/02/08/five-weeks-long-wait-universal-credit-join-campaign/ (Accessed: 2 March 2019).

Turn2us (2021a) *Employment and Support Allowance (ESA) - What is Employment and Support Allowance (ESA)?*, Available at: https://www.turn2us.org.uk/Benefit-guides/Employment-and-Support-Allowance/What-is-Employment-and-Support-Allowance (Accessed 2 February 2022).

Turn2us (2021b) *What is Personal Independence Payment (PIP)?*, Available at: https://www.turn2us.org.uk/Benefit-guides/Personal-Independence-Payment/What-is-PIP (Accessed 2 February 2022).

Tyler, I (2008) "Chav Mum Chav Scum": Class disgust in contemporary Britain', *Feminist Media Studies*, 8(1), pp. 17-34.

Tyler, I. (2013) Revolting Subjects: Social Abjection and Resistance in Neoliberal Britain. Bloomsbury Academic & Professional.

Tyler, I. (2014a) 'Rethinking the Sociology of Stigma in the Transition to Postwelfare States', *The Stigma Doctrine*, 25 October. Available at: https://socialabjection.wordpress.com/2014/10/25/rethinking-the-sociology-of-stigma-in-the-transition-to-postwelfare-states/ (Accessed: 1 November 2016).

Tyler, I. (2014b) '"Being Poor is Not Entertainment": Class Struggles Against Poverty Porn', *Manchester: Social Action and Research Foundation*, 4 September. Available at: http://www.the-sarf.org.uk/being-poor-is-not-entertainment-class-struggles-against-poverty-porn-by-imogen-tyler/ (Accessed: 12 October 2016).

Tyler, I. (2015) 'The Sociology of Stigma: Why Research Stigma Today?', *The Stigma Doctrine*, 7 September. Available at: https://stigmamachine.com/2015/09/07/the-sociology-of-stigma-why-research-stigma-today/ (Accessed: 1 November 2016).

Tyler, I. (2020) *Stigma: The Machinery of Inequality*. London: Zed Books.

Tyler, I. and Slater, T. (2018) 'Rethinking the sociology of stigma', *The Sociological Review*, 66(4), pp. 21-743.

Unite the Union (2017) 'Unite urges government to stop cruel benefit sanctions causing destitution and misery to tens of thousands of families', *PoliticsHome*, 29 March. Available at: https://www.politicshome.com/members/article/unite-urges-government-to-stop-cruel-

benefit-sanctions-causing-destitution-and-misery-to-tens-of-thousands-of-families (Accessed: 2 April 2017).

Unite the Union (2020) '#UniversalDisCredit Day of Action', 15 July. Available at: https://uniteforoursociety.org/blog/universaldiscredit-day-of-action/ (Accessed: 1 August 2020).

van Oorschot, W. (2002), 'Targeting welfare: on the functions and dysfunctions of means testing in social policy', in Townsend, P. and Gordon, D. (eds.), *World poverty: new policies to defeat an old enemy*. Bristol: Policy Press, pp. 171-193.

Wacquant, L. (2007) 'Territorial Stigmatization in the Age of Advanced Marginality', *Thesis Eleven*, 91, pp. 66-77.

Wacquant, L. (2008) Urban Outcasts: A Comparative Sociology of Urban Marginality. Cambridge: Polity Press.

Wacquant, L. (2009) Punishing the Poor: The Neoliberal Government of Social Insecurity. London: Duke University Press.

Walker, R. (2014). *The Shame of Poverty*. Oxford: Oxford University Press.

Walker, R. and Chase, E. (2015) 'Shame, Stigma and Policy Effectiveness', Developing and Implementing Policies for a Better Future at Work 4th Conference of the Regulating for Decent Work Network, International Labour Office, Geneva, Switzerland, 8-10 July, pp. 1-19. Available at: http://www.rdw2015.org/uploads/submission/full_paper/84/ShameWalkerChase .pdf. (Accessed: 5 October 2016).

Walker, R., Chase, E. and Lødemel, I. (2012) 'The indignity of the Welfare Reform Act', *Poverty*, 143, pp. 9-12.

Walters, W. (1997) 'The active society: new designs for social policy', *Policy and Politics*, 25(3), pp. 221-234.

Watts, B., Fitzpatrick, S., Bramley, G. and Watkins, D. (2014) *Welfare sanctions and conditionality in the UK*. York: Joseph Rowntree Foundation.

Webb, B. and Webb, S. (1909) *Minority Report of the Royal Commission on the Poor Laws*. London: Longmans, Green Co.

Webster, D. (2014) 'Who Benefits? An independent inquiry into women and Jobseekers Allowance', *Fawcett Society*, 8 July. Available at: http://www.cpag.org.uk/sites/default/files/uploads/CPAG-Fawcett-Soc-DWebster-evidence-rev-8-Jul-14.pdf (Accessed: 28 October 2016).

Webster, D. (2017) Briefing: Benefit Sanctions Statistics: JSA, ESA, Universal Credit and Income Support for Lone Parents. London: CPAG.

Weiss, M., Ramakrishna, J. and Somma, D. (2006) 'Health-related stigma: rethinking concepts and interventions', *Psychology, Health and Medicine*, 11, pp. 277-287.

WelCond (2018) Final findings Report of the Welfare Conditionality Project 2013-2018. York: Welfare Conditionality Project.

Wetherley, P. (2001) 'The reform of welfare and the way we live now: a critique of Giddens and the Third Way', *Contemporary Politics*, (7)2, pp. 149-170.

White, P. and Selwyn, N (2013) 'Moving on-line? An analysis of patterns of adult Internet use in the UK, 2002–2010', *Information, Communication & Society*, 16(1), pp. 1-27.

Williams, F. (1989) Social Policy: A Critical Introduction. Issues of Race, Gender and Class. Cambridge: Polity Press.

Wilson, E. (1977) *Women and the Welfare State*. London: Tavistock

Women's Budget Group (2017) *Universal Credit: A briefing from the UK Women's Budget Group*, 22 October. Available at: https://wbg.org.uk/analysis/universal-credit-briefing-uk-womens-budget-group/ (Accessed: 10 November 2017).

Wirral Council (2021) *Discretionary Housing Payments.* Available at: https://www.wirral.gov.uk/benefits-and-money/discretionary-housing-payments/what-are-discretionary-housing-payments (Accessed: 4 November 2021).

Wright, S. and Patrick, R. (2019) 'Welfare conditionality in lived experience: aggregating qualitative longitudinal research', *Social Policy and Society*, 18(4), pp. 597-613.

Wright, S., Fletcher, D.R. and Stewart, A. (2020) 'Punitive benefit sanctions, welfare conditionality and the social abuse of unemployed people in Britain: transforming claimants into offenders?', *Social Policy and Administration*, 54(2), pp. 278-294.

Young, T. (2016) ‘Why only Lefties could go misty eyed at a movie that romanticises Benefits Britain’, *The Daily Mail*, 25 October. Available at: http://www.dailymail.co.uk/debate/article-3869182/Why-Lefties-misty-eyed-movie-romanticises-Benefits-Britain-says-TOBY-YOUNG.html (Accessed: 1 November 2016).

Appendices

Appendix 1: Participant profiles

This section gives an overview of each participant's life and circumstances, with all information accurate at the time of the interview. Their main benefit-related and demographic details are summarised in Appendix 2. Tables outlining the participants' benefit trajectories can be found in Section 6.2.2.

Jasmine

Jasmine is 22 and lives alone with her pets. She is currently claiming Universal Credit and seeking suitable work. However, Jasmine suffers with anxiety, hormonal issues, abdominal pain and trouble maintaining weight, and has appointments with specialists, which impact on her daily life and her capacity to undertake work-related obligations. Jasmine experienced a lot of financial insecurity while growing up and had a turbulent relationship with her Mum. Consequently, Jasmine moved out of her family home when she was 15 and lived in Supported Living while sitting her GCSEs. As a young person under the age of 21 without parental support, she initially claimed Income Support, and was later switched to Jobseeker's Allowance. She moved to a new area and claimed Jobseeker's Allowance while seeking suitable work, but experienced mental health issues and moved back to her family home temporarily, before settling in a new area where she now lives. Jasmine enjoys cycling and has some friends nearby who she likes to go on drives and daytrips with. She finds the support at the organisation helpful for her wellbeing and self-esteem. Jasmine has future ambitions like to train to be an accountant.

Dawn

Dawn is 36 and is a single parent to four dependent children (one of whom is her step-son and has a disability). Dawn claims Universal Credit (with limited capability to work owing to difficult current circumstances) and disability benefits on behalf of her step-son. She first claimed Jobseeker's Allowance (JSA) (joint claim) at age 18 as a new mother when her then partner became unemployed. Dawn then moved off JSA when her partner found employment, but began claiming Income Support (IS) as a single parent following the relationship breakdown. She found employment and moved off Income Support, but stopped working when she became pregnant and was solely financially reliant on new partner. However, Dawn's partner was made redundant so the couple claimed JSA until her partner found new

employment, but they still claimed Tax Credits and Housing Benefit. Following her relationship breakdown, Dawn and her children recently became temporarily homeless while her new claim for Universal Credit as a single parent was assessed and processed. She informed the DWP of her change in circumstances on the day she moved out, however she was later told she had been overpaid. They had to stay with family for several months before obtaining occupation order to move back into their previous home. She had to visit a food bank due to the lack of support from the benefits system during this time. Dawn also applies for Discretionary Housing Payment (DHP) to help with rent costs due to the removal of the spare room subsidy. Dawn has found the counselling and confidence training work at the organisation invaluable to helping her get through this difficult time. Dawn enjoys taking care of her children and making them laugh. She discussed the nurturing role she provided for her siblings from a very young age in helping to bring them up. She is soon going to train to be a nurse.

Norma

Norma is 77 and lives with her husband and they currently claim Pension Credit. Norma was a stay-at-home mother to three children when her husband was made redundant in 1980 as part of a wave of mass redundancies in the industry he worked in. Owing to his age and the socioeconomic climate at the time, he struggled to find work and the family claimed Unemployment Benefit. When her children had moved out, Norma gained part-time paid employment in a care setting for several years while claiming Jobseeker's Allowance, and then undertook 16 years of voluntary work. She experienced mental health issues a couple of years ago and found support from the organisation, which she continues to find helpful for her wellbeing. Norma enjoys attending the group activities and taking care of her grandchildren.

Amy

Amy is 23 and lives with her Mum and siblings. She claims Universal Credit bit is enrolled on a self-employment scheme called the New Enterprise Allowance (NEA) selling beauty products. Since leaving school, Amy has been in paid employment for short periods, but this has been impacted by her mental health. She began claiming benefits for the first time recently after leaving university due to experiencing psychosis. Amy suffers with anxiety and depression and was recently diagnosed with autism. Consequently, she applied for Personal Independence Payment (PIP) for extra financial help with daily living costs due to her disability

but was denied support following assessment. She missed the appeal deadline and has struggled to reapply. Amy enjoys spending time with her family and finds the support at the organisation helpful for improving her confidence.

Natalie

Natalie is 31 and lives with her husband and four children, one of whom has severe autism. The family claim Jobseeker's Allowance (JSA). Her husband works part-time. She first claimed JSA after leaving college and still living with her Mum and siblings, and then claimed Income Support (IS) while pregnant with her first child. Natalie applied for Employment and Support Allowance (ESA) on the basis of her long-term struggles with anxiety and depression, but was deemed ineligible following assessment and did not re-apply. She found part-time employment but the position was only temporary, and she now does volunteer work. Natalie enjoys spending time with friends and family, and is finding the support at the organisation helpful.

Michelle

Michelle is 48 and has two daughters, one of whom lives with her. She was self-employed and claiming Universal Credit (UC) to supplement her unpredictable monthly income, but 9 months prior to the interview, Michelle had back surgery and was unable to work, so claimed Statutory Sick Pay (SSP). Her recovery time much longer than anticipated and she suffers with ongoing severe pain and mobility problems. Furthermore, her mental health has depleted considerably during this period. Michelle attended a medical assessment in order to receive UC on the basis of ill health and was subsequently deemed as having limited capability for work & work-related activities and awarded UC with a backdated payment of 3 months. During this time, she also applied for Personal Independence Payment (PIP) for extra help with daily living costs due to her health problems and attended an assessment. However, she was deemed ineligible for PIP, so she is planning to re-apply with the help of a friend. Michelle and is benefiting from the help of the organisation through which I recruited her. She enjoys spending time with her grandchild.

Lorraine

Lorraine is 44 and lives with her husband and two children. The family claim Universal Credit (UC). After leaving school, she was in steady employment and first claimed benefits while

pregnant with first child before returning to work. When Lorraine's father became terminally ill, Lorraine and her husband claimed Carer's Allowance (CA) as his full-time carers for 13 years, while also claiming Income Support and Child Tax Credits. After her father passed away, her and her husband were obliged to seek paid work. Her husband got a job and worked overtime, but they were told he had earned over the threshold for claiming Tax Credits, so they had to pay money back. They began claiming UC when her husband was laid off from work. During the same week her mother passed away and Lorraine was then signed off from work-related obligations due to bereavement and depression. She attended a medical assessment confirming her inability to work and her entitlement to sick payment on UC. They were also told her husband could claim carer's element for being her carer. However, 18 months later they were told they were not entitled to this and had been given it in error. They were told they owe the £1,500 back to the DWP and are awaiting the outcome from a tribunal. Lorraine also applied for Personal Independence Payment (PIP) for extra help with living costs due to ill health, as in addition to depression, Lorraine has been diagnosed spinal problems causing pain and mobility problems. She is awaiting her PIP assessment, and if successful, her husband can claim carer's element of UC and they will not have to pay back the £1,500. Lorraine is benefiting from the support of the organisation. She enjoys spending time with her family.

Joanne

Joanne is 35 and currently lives with her parents. She was born with a serious heart condition and claimed Disability Living Allowance (DLA) for many years. She was awarded support on an unconditional, indefinite basis due to her chronic health condition. She was granted an enhanced rate and a car through the Motability scheme. In 2016, however, Joanne was told her DLA was being switched to Personal Independence Payment (PIP) and she had to re-apply and be assessed. Her benefit rate was downgraded from enhanced to standard for mobility, therefore she was no longer eligible for her vehicle. Joanne successfully appealed, receiving the enhanced rate for the mobility and daily living domains. However, upon re-assessment 2 years later, she was again downgraded to the standard level for both domains and felt too drained to appeal. Joanne also claimed Jobseeker's Allowance (JSA) after completing her university degree, while undertaking volunteering work then 2 years of part-time paid work. Following the deterioration of her heart condition, Joanne applied for Employment and Support Allowance (ESA) but following an assessment she was deemed fit-for-work and ineligible 5 weeks after having open heart surgery and with a new diagnosis of

chronic fatigue syndrome. Joanne successfully appealed this decision and was eventually awarded the money 3 years later, so she now claims ESA and PIP. She finds the support at the organisation helps her cope with her anxiety and improve her self-confidence. Joanne is currently studying for another degree part-time, and she enjoys reading and is learning to play the ukelele.

Christine

Christine is 58, lives alone and claims Employment and Support Allowance (ESA) and Personal Independence Payment (PIP). After she left school, she wanted to train to become a hairdresser, but she could not afford to buy the equipment needed. Christine began claiming Unemployment Benefit but was transferred on to Sickness Benefit (and later Incapacity Benefit) due to suffering with depression and severe skin problems which flare up when she is stressed. She witnessed the toughening of the system during New Labour's time in office with the introduction of new medical assessments to reassess eligibility for disability benefits, and was found fit-for-work on several occasions, adding to her stress and chronic poor mental health. Christine claimed Carer's Allowance (CA) while taking care of her chronically ill father, and later, her partner who had Multiple Sclerosis. Christine applied for ESA and PIP and was granted support. Owing to her long-term struggles with alcohol, Christine is seeking support from a local support organisation, as well as the community organisation through which I recruited her, both of which she finds invaluable for making new friends and improving her confidence. Through these organisations, she has undertaken several courses and has picked up new hobbies and interests.

Donna

Donna is 36 and is a single mother to three children, including a son with autism. She claims Employment and Support Allowance (ESA) based on her mental health, as she was diagnosed with bipolar disorder when she was 12. After finishing school, claimed Jobseeker's Allowance (JSA) for about 6 months before finding work. She struggled to work due to her mental health and then became pregnant and claimed Income Support (IS). Donna then successfully applied for ESA and was placed in the Support Group and entitled to Severe Disability Premium. Donna also began claiming Disability Living Allowance (DLA) at the age of 18 for extra help with daily living costs. She was awarded support on an unconditional, indefinite basis due to her chronic mental health condition. However, last year, Donna's DLA was switched to

Personal Independence Payment (PIP) and she was deemed ineligible for the benefit following an assessment. She lost a substantial amount of money per week and was no longer entitled to her ESA Severe Disability Premium. Donna missed the appeal because her mother passed away. She has re-applied for PIP and is waiting to hear back about an assessment date. Donna enjoys spending time with her children and her friends, and has recently joined the organisation to help with her wellbeing.

Sue

Sue is 53 and lives with her husband. Sue was born with spina bifida, but until recently she was able to live a very active life. She was full-time paid employment until the age of 35, then got divorced and suffered with depression and first applied for disability benefits. Sue was granted Employment and Support Allowance (ESA) and placed in the Support Group following assessment. 8 months ago, Sue moved in with her now husband and informed the DWP of her change in circumstances, however there was an administrative error meaning this was not acknowledged and they received a fine of £1000 for not reporting a change in circumstances. This has now been rectified, but moving in together has affected Sue's ability to claim an independent income and she is worse off financially. Sue also applied for Disability Living Allowance (DLA), which she was granted on unconditional, indefinite basis due to her chronic condition. With the switch to Personal Independence Payment (PIP), she has had to re-apply and is awaiting an assessment. Sue undertook volunteering work for 12 years but her recent decline in mobility has influenced her giving this up. Sue enjoys spending time with her husband and going on holiday, and she has recently begun to get support from the organisation.

Lucy

Lucy is 44 and is a single mother of one child. She claims Employment and Support Allowance (ESA) (Support Group) and Personal Independence Payment (PIP) because she suffers with a rheumatological condition triggered during pregnancy which affects her joints and her mobility. After leaving school Lucy was in steady employment, however in one job she experienced abusive behaviour from her manager so left and first claimed Jobseeker's Allowance (JSA). However, after a couple of weeks, Lucy took up a position as a full-time as a Job Centre advisor and remained in this job for 10 years. Lucy became pregnant, her then partner left her and she began to experience the symptoms of her underlying condition and was dismissed from her job due to sickness. She appealed against the dismissal but gave up after

her son was born and began claiming Income Support (IS) as a single parent. When her son was 5, Lucy's health and mobility began to deteriorate so she applied for ESA and was granted the benefit and placed in the Support Group. Additionally, Lucy applied for Personal Independence Payment (PIP) for extra help with daily living costs due to her disability, but had her entitlement denied following an assessment. She successfully appealed this decision. Lucy enjoys caring for her child, being creative and learning new things. She has recently begun using the support of the organisation and is hoping to do courses to improve her low self-esteem.

Zoe

Zoe is 38 and claims Universal Credit (UC) while in a phased return to work due to suffering with post-traumatic stress disorder (PTSD). She currently lives alone, but her son is coming to live with her soon when he is released from prison. Zoe has two sons who she had when she was 15 and 16, when she claimed Income Support (IS) as a young single parent. After completing her educational qualifications, Zoe became employed full-time in a number of professional jobs, claiming Jobseeker's Allowance (JSA) for short periods between jobs. She moved to new area and was employed full-time, however she was abused, assaulted, drugged and raped by her partner. Zoe therefore took time off work and claimed Statutory Sick Pay (SSP). She applied for Universal Credit (UC) to help her with paying rent to top up her SSP while off sick, however she was only awarded £50 and some food vouchers for four months, with no help with housing or Council Tax. She subsequently ended up in four months of rent arrears by the time she returned to work. After returning to work full-time, Zoe experienced more abuse resulting in PTSD, so took 3 months off work and re-applied for UC. She was given two repayable advance payments due to a delayed first payment, followed by a small amount one month and then nothing any of the subsequent months, so she has been without an income besides SSP, with no help with rent or Council Tax. She is currently in a phased return to work 2 days a week, but is still in rent arrears and having to use fuel vouchers for gas and electricity, food banks and supermarket vouchers, and she can barely meet transport costs to travel to work. Zoe is creative and has a flair for design, and is also writing a book based on her life experiences. She enjoys spending time with family and friends when she can. She has very recently heard about the organisation and hopes to benefit from its counselling and wellbeing activities.

Tracy

Tracy is 41 and lives with her husband (who works away a lot) and child who has severe autism. She claims Carer's Allowance (CA) and Disability Living Allowance (DLA) on her child's behalf to cover additional daily living costs associated with his disability. She has two other children who she brought up as a single mother, who now live independently. Tracy first claimed Income Support (IS) when pregnant with her first child as a single parent. She found flexible employment in hospitality, so stopped claiming benefits, however her income did not cover her rent, bills, living and childcare costs and barely allowed her time with her young children, so she went back on to benefits. Tracy met her partner (now husband) and moved in together, however his income meant she was no longer eligible for benefits so stopped claiming and was financially reliant on him. They had a child and began claiming CA and DLA for his disability. Tracy has been employed part-time for almost 5 years while claiming CA and DLA, with flexible hours around husband's job. Recently, she was told she had earned £17 over the earning threshold for CA entitlement and has had her payment stopped and is waiting to find out whether she will get next payment. In the future, she hopes to find a better job that she enjoys more. Tracy has recently joined a couple of local community organisations (including the one through which I recruited her) to meet new friends and get support.

Kerry

Kerry is 51, lives alone, and works for an agency on a zero-hours contract in promotions and hospitality. Since leaving school, Kerry has worked in a lot of temporary jobs, recurrently claiming benefits for short periods between jobs. At the time of recruitment, Kerry had put in a claim for Universal Credit due to being offered inadequate hours in her zero-hours contract job. However, owing to the delays with her claim, by the time it had been processed, she was offered full-time hours again, so was not claiming benefits at the time of the interview. Kerry received a criminal caution after an altercation with a controlling male friend while under the influence of alcohol and worries that this will impact on future work prospects. She is interested in social justice and human rights and enjoys being creative.

Alison

Alison is 50 and lives with her husband and child. Her other child is at university. Alison claims Universal Credit (UC) while working part-time and undertaking training to get into a new career. She was in steady employment since leaving school, then got married and had her two

children and became financially reliant on husband who was in a well-paid job. The sudden relationship breakdown 8 years ago resulted in her being left with husband's debts and she began claiming benefits as a single mother. Alison moved to a rented flat and enquired about Council Housing but was told she was a low priority and would have to move to a different area away from her children's school, and she was later informed she had been taken off the list. She had to move house a couple of times due to unaffordable rent costs. Alison found part-time employment. 3 years ago, Alison met her new partner (now husband), and he moved in with her and her children. He had retired and was receiving a work pension but returned to work, which affected Alison's benefit entitlement. She put in a new claim for UC as this was being rolled out to replace existing benefits, but she was barely entitled to anything owing to her husband's income and her part-time employment. Her eldest child going to university affected the Housing and Child elements of UC, causing them to lose almost £400 a month, despite her coming home very regularly. Alison is looking forward to more financial stability when she begins her new career. She enjoys walking and spending time with her husband and children.

Appendix 2: The study participants- overview

Pseudonym	Age	Ethnicity	Current Benefit	Motherhood	Lone parenthood	Household composition	Stated disability/ health condition (mental and/or physical)	Employment status
Jasmine	22	White British	**UC**	No		Living alone	Anxiety, hormonal imbalance, abdominal issues	Unemployed
Dawn	36	White British	**UC** (& disability benefits for step-son)	Yes	No	Single parent household (5 children)	No	Economically inactive, but due to begin training
Norma	77	White British	**PC**	Yes	No	Living with partner/spouse	No	Economically inactive
Amy	23	White British	**UC**	No		Living with parent(s)	Autism, experience of psychosis, anxiety, depression	Unemployed but doing New Enterprise Allowance (NEA) scheme through Jobcentre
Natalie	31	White British	**JSA**	Yes	No	Coupled parent household (4 children)	Anxiety, depression	Voluntary work
Michelle	48	White British	**UC**	Yes	Yes	Single parent household (1 child)	Bulging disc, depression	Economically inactive
Lorraine	44	White British	**UC**	Yes	No	Coupled parent household (2 children)	Bulging disc, depression	Economically inactive
Joanne	35	White British	**ESA** & **PIP**	No		Living with parent(s)	Congenital heart condition, dyspraxia, anxiety	Student
Christine	58	White British	**ESA** & **PIP**	No		Living alone	Depression (long-term), severe skin problems	Economically inactive
Donna	36	White British	**ESA** (& **DLA** for son)	Yes	Yes	Single parent household (3 children)	Bipolar disorder, depression	Economically inactive
Sue	53	White British	**ESA** & **PIP**	No		Living with partner/spouse	Spina bifida, depression	Economically inactive
Lucy	44	White British	**ESA** & **PIP**	Yes	Yes	Single parent household (1 child)	Rheumatological condition affecting mobility	Economically inactive
Zoe	38	White British	**UC**	Yes	Yes, previously	Living alone	Post-Traumatic Stress Disorder	Employed (phased return to full-time)
Tracy	41	White British	**DLA** for son & **CA**	Yes	Yes, previously	Coupled parent household (1 child)	No	Employed part-time
Kerry	51	White British	Not currently claiming benefits	No		Living alone	Foot injury through work	Employed (zero hours)
Alison	50	White British	**UC**	Yes	Yes, previously	Coupled parent household (2 children)	No	Employed part-time & undertaking training

Appendix 3: Ethical approval letter

University of Liverpool Central Research Ethics Committee

UNIVERSITY OF LIVERPOOL

Central University Research Ethics Committee A

5 March 2019

Dear Dr Hancock

I am pleased to inform you that your application for research ethics approval has been approved. Application details and conditions of approval can be found below. Appendix A contains a list of documents approved by the Committee.

Application Details

Reference:	4068
Project Title:	The impact of claiming benefits on women's lives
Principal Investigator/Supervisor:	Dr Lynn Hancock
Co-Investigator(s):	Ms Nancy Evans
Lead Student Investigator:	-
Department:	Sociology, Social Policy and Criminology
Approval Date:	05/03/2019
Approval Expiry Date:	Five years from the approval date listed above

The application was **APPROVED** subject to the following conditions:

Conditions of approval

- All serious adverse events must be reported to the Committee (ethics@liverpool.ac.uk) in accordance with the procedure for reporting adverse events.
- If you wish to extend the duration of the study beyond the research ethics approval expiry date listed above, a new application should be submitted.
- If you wish to make an amendment to the study, please create and submit an amendment form using the research ethics system.
- If the named Principal Investigator or Supervisor leaves the employment of the University during the course of this approval, the approval will lapse. Therefore it will be necessary to create and submit an amendment form within the research ethics system.
- It is the responsibility of the Principal Investigator/Supervisor to inform all the investigators of the terms of the approval.

Kind regards,

Central University Research Ethics Committee A

ethics@liverpool.ac.uk

CURECA

Page 1 of 2

Appendix - Approved Documents

(Relevant only to amendments involving changes to the study documentation)

The final document set reviewed and approved by the committee is listed below:

Document Type	File Name	Date	Version
Interview Schedule	Draft Interview Schedule v1.0	19/12/2018	1
Participant Information Sheet	Participant Info Sheet V2.0	19/12/2018	2
Participant Consent Form	Consent Form v1.0	19/12/2018	1
Debriefing Material	Debriefing sheet V1.0	19/12/2018	1
Debriefing Material	Debriefing sheet v2.0	28/02/2019	2.0
Participant Consent Form	Consent Form v2.0	28/02/2019	2
Participant Information Sheet	Participant Info Sheet V3.0	28/02/2019	3
Interview Schedule	Interview Schedule v2.0	28/02/2019	2

Appendix 4: Interview topic guide

NB. General themes/topics are in brackets next to each question. Interview schedule is to be used in a loose/flexible way, and order is not prescriptive. Conversation to be guided by participant and what they choose to share.

Follow up answers using the same phrasing as the participant.

Keep responses open and neutral, e.g. can you tell me a bit more about that?; what makes you think that?

Contextualising questions

- Tell me a little bit about yourself (Warming up/background/context)
- What would you describe as the important things in your life? (Relationships/caring responsibilities/hobbies/ways to resist stigma)

- How would you describe the kind of person you are? (Self-perceptions, sense of self/identity)
- What does your day-to-day life look like? (Daily life/ caring responsibilities/ hobbies etc.)
- Tell me about the neighbourhood you live in (Community/support networks/ housing/ possible stigma associated with place)
- What sort of things do you look forward to normally? (Support networks/ coping mechanisms)

Questions specific to claiming benefits

- I'd like to hear your story or journey of claiming benefits? Are there any specific experiences that stand out? (Impact of benefits on life)
- Do you think claiming benefits has impacted on our life (possible reference to earlier answers)? In what ways? (Impact of benefits on life)
- The benefits system has been going through a lot of changes; have these changes affected you at all? (E.g., Switch to Universal Credit, Bedroom Tax, increase in work-related conditionality) Is there one change in particular that's had more impact than others? (Impact of policy on life)
- Have you ever had any other sources of income? Can you tell me about that? (Employment)
- Does being on benefits ever affect how you feel about yourself? (Possible reference to earlier answers) In what ways? What do you think causes this? (Impact on self-perceptions)

- If you could, what would you change about the existing benefit system? (Feelings about benefits system, possible reference to earlier answers)

Closing/rounding off

- What would be your perfect day? What are your hopes for the future? (Sense of optimism/ hope)

Appendix 5: Information poster to aid recruitment

Appendix 6: Participant Information Sheet

Participant Information Sheet

Project title: The impact of claiming benefits on women's lives

You are being invited to participate in a research study which explores the lives and perspectives of women who claim benefits. Before you make your decision about taking part, it is important for you to understand the purpose of the research and what it will involve.

Please take time to read the following information carefully and discuss it with others if you wish. Feel free to ask if anything is unclear or you would like more information. Contact details are provided at the end of this sheet.

You do not have to accept this invitation and should only agree to take part if you want to.

Thank you

Who is the researcher?

My name is Nancy Evans- I am a PhD student at Liverpool University and this study is part of my project (I am not an advocate or volunteer for [redacted]). I'm interested in hearing the stories of women who receive benefits.

What is the purpose of the study?

The study aims to explore the lives and perspectives of women who claim benefits. The benefits system has been going through a lot of changes. In this context, it is important to consider women's experiences and views in relation to benefits, as well as their lives more generally.

To do this, I will conduct face-to-face interviews with women like yourself. The interview questions will explore your experiences with the benefits system, but also your day-to-day lives, which may be shaped by these experiences.

Why have I been asked if I would like to take part?

For this study, I am interested in talking to women who claim benefits. In total, I will interview up to 25 women.

Do I have to take part?

No. Taking part in this research is completely voluntary. You may withdraw from the study at any point without giving a reason. If you want to withdraw, you can do so by contacting me (Nancy Evans) or [redacted] (my supervisor) to let us know (full contact details on pages 4-5).

What will happen if I take part?

If you would like to take part, we will arrange a date and time for our face-to-face interview. I will give you a consent form to read and confirm you are happy to participate. The interview will take place in a private room at [redacted]'s [redacted] premises and will last around an hour.

In the interview, I will ask you about different aspects of your lives, and your experiences with benefits. You will be given the opportunity to express your thoughts, feelings and experiences, and what matters to you. You have the right to refuse to answer any questions you feel uncomfortable with, without giving a reason.

The interview will be audio-recorded. When I write up the interview, your name will be anonymised so that you are not identifiable. Myself and my supervisors will be the only people who have access to the data, which will be stored securely for the duration of the project (see table below for full details of data storage).

How will my data be used?

The University processes personal data as part of its research and teaching activities in accordance with the lawful basis of 'public task', and in accordance with the University's purpose of "advancing education, learning and research for the public benefit.

Under UK data protection legislation, the University acts as the Data Controller for personal data collected as part of the University's research. The Principal Investigator, Nancy Evans, and Supervisor, Dr Lynn Hancock, act as the Data Processors for this study, and any queries relating to the handling of your personal data can be sent to [redacted] or [redacted].

Further information on how your data will be used can be found in the table below.

How will my data be collected?	Digital audio recording device
How will my data be stored?	Secure password-protected University of Liverpool M Drive
How long will my data be stored for?	Until completion of the project
What measures are in place to protect the security and confidentiality of my data?	The interview will be anonymised when transcribed. Original recordings will be deleted from the recording device and a copy will be saved securely on a password-protected network for the duration of the project. Anonymised interview transcripts will be saved on a secure password-protected network and paper copies will be stored in a locked drawer in a secure University of Liverpool office.
Will my data be anonymised?	Yes, you will not be identifiable.
How will my data be used?	Analysed by myself, with findings (including anonymous quotations) published in a PhD thesis as well as peer-reviewed journals, conference papers and other publications.
Who will have access to my data?	Myself and my supervisors.
Will my data be archived for use in other research projects in the future?	Anonymised digital copies of interview transcripts will be stored for up to 10 years after completion of the project.
How will my data be destroyed?	Digital copies deleted; paper copies shredded.

Are there any risks in taking part?

As the interview will involve you telling me about your life, including your experiences with the benefits system, it may bring up sensitive topics which can cause emotional distress. However, you are encouraged to let me know if you feel uncomfortable as a result of the research, and we can take appropriate action. During the interview, you can ask to take a break

at any time or refuse to answer any question, without giving a reason, and you also have the right to withdraw from the research at any point before, during or after the interview. I will also provide you with a debriefing sheet after the interview containing sources of support.

Are there any benefits in taking part?

The research provides a platform for you to share your stories and thoughts with me, which may be an enjoyable and valuable experience for you. The data you share during the interview will be used in a way which adds to knowledge and understanding of the experiences of people in your position, which may benefit others in the future.

I will be happy to send you updates about the research if you wish to receive these, so that you can be kept in the loop about the project. Additionally, you will be invited to a pamper day at [redacted], where I will feed back on how you have helped me and share some general findings.

What will happen to the results of the study?

The results of the study, once disseminated into a PhD thesis, will be made available in the public domain and at the University of Liverpool library. The results will include (anonymised) quotations from the interviews I conduct. They may also be used in other publications. You will not be identifiable in any publications.

What will happen if I want to stop taking part?

You can withdraw from the study at any time, without explanation. Your data can be removed and not used in the study, at your request. To withdraw your data from the research, please contact myself ([redacted]) or my primary supervisor ([redacted]).

What if I am unhappy or if there is a problem?

If you are unhappy, or if there is a problem, please feel free to let us know by contacting Dr Lynn Hancock [redacted]) and we will try to help. If you remain unhappy or have a complaint which you feel you cannot come to us with, then you should contact the Research Ethics and Integrity Office at ethics@liv.ac.uk. When contacting the Research Ethics and Integrity Office, please provide details of the name or description of

the study (so that it can be identified), the researcher(s) involved, and the details of the complaint you wish to make.

The University strives to maintain the highest standards of rigour in the processing of your data. However, if you have any concerns about the way in which the University processes your personal data, it is important that you are aware of your right to lodge a complaint with the Information Commissioner's Office by calling 0303 123 1113.

Who can I contact if I have further questions?

Dr Lynn Hancock (contact details below).

Contact details of investigatory team

Nancy Evans (Student Investigator/ PhD Candidate)

[redacted]

Dr Lynn Hancock (Principal Investigator/ Primary Supervisor)

[redacted]

[redacted]

[redacted]

Louise Hardwick (Secondary Supervisor)

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

Appendix 7: Consent form

Committee on Research Ethics

PARTICIPANT CONSENT FORM

Title of Research Project: **The impact of claiming benefits on women's lives**

Researcher: Nancy Evans

Pleaseinitial each box to indicate your agreement

1. **I confirm that I have read and have understood the information sheet dated February 2019 for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.** ☐

2. **I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my rights being affected. In addition, should I not wish to answer any particular question or questions, I am free to decline.** ☐

3. **I understand that, under the Data Protection Act, I can at any time ask for access to the information I provide and I can also request the destruction of that information if I wish.** ☐

4. **I understand that confidentiality and anonymity will be maintained and it will not be possible to identify me in any publications.** ☐

5. **I understand that if I discuss issues that cause concern about mine or someone else's safety and wellbeing, the researcher may be obliged to tell somebody.** ☐

6. **I agree to take part in the above study.** ☐

Participant name	Date	Signature

_____ _____ _____

Researcher Date Signature

Principal Investigator

Dr Lynn Hancock

[redacted]

Student Investigator

Nancy Evans

[redacted]

Appendix 8: Debriefing sheet

Participant Debriefing Sheet

Project title: The impact of claiming benefits on women's lives

Thank you

Thank you for your participation in my research. The data you have shared as part of the interview will add to knowledge and understanding of the experiences of women who claim benefits, which I hope will benefit others in future.

Your data and rights

Your anonymity will be preserved throughout this study, which means there will be nothing in the data files or results that will identify you in any way. Your consent forms containing your name and your signature will be stored securely for the duration of the project and destroyed after completion.

Findings taken from this study will be presented in my PhD thesis, and may also be published in journals and presented at conferences to share knowledge and ideas with other professionals. Your anonymity will be maintained in all findings shared.

You have the right to withdraw your data from our study at any time before, during or after either interview (contact details below).

Contact information

If you wish to contact me about the research, here are my contact details:

Nancy Evans (Student Investigator/PhD candidate)

Telephone: [redacted] / Email: [redacted]

Dr Lynn Hancock (Principal Investigator/ Primary Supervisor)

Telephone: [redacted] / Email: [redacted]

Sources of Support

Sometimes it is possible that painful thoughts or memories could be stirred up in talking about your life and personal experiences, or you may need some practical support about benefits. If you feel like you need further support or someone to talk to, see below for advice and details of services and organisations that offer help.

- **Tell someone you trust**

  You may find it helpful to talk a friend, relative or a member of staff at [redacted] about how you are feeling.

- **Citizens Advice Bureau**

  The CAB offers advice on various issues including benefits, work, housing debt and money issues.

  https://citizensadvicewirral.org.uk/

  Telephone: 0300 33 00 111 (calls charged at your local rate) (Monday - Friday, 10am to 4pm)

- **Rethink Mental Illness**

  Rethink offer practical advice on various issues including mental health support, benefits, employment rights, debt and money issues.

  https://www.rethink.org

  Telephone: 0300 5000 927 (calls charged at your local rate) (Monday - Friday, 10am to 2pm).

- **Mind: For Better Mental Health**

  Mind offer various services for mental health needs https://www.wirralmind.org.uk/

  Drop-in Centre: Wirral Mind, The Fountain Project, 90-92 Chester St, Birkenhead CH41 5DL

  Telephone: 0151 512 2200

- **Samaritans: you are not alone**

  Samaritans offer a free helpline if you need somebody to talk to in confidence

  https://www.samaritans.org/

  Telephone: 116 123 (free helpline, open 24 hours a day, 7 days a week; does not appear on phone bill) / Email: jo@samaritans.org

- **Talk to your GP**

  You might find it helpful to tell your GP how you are feeling

  https://www.nhs.uk/using-the-nhs/nhs-services/

- **NHS helpline**

  NHS 111 can help if you have an urgent medical problem and you're not sure what to do

  Telephone: 111 (free helpline, open 24 hours a day, 7 days a week)

Appendix 9: Research dissemination

Publications

April 2022	**Journal article**: 'Coping with Gendered Welfare Stigma: Exploring Everyday Accounts of Stigma and Resistance Strategies among Mothers who Claim Social Security Benefits', *Social Policy and Society*, 1–11. http://doi.org/10.1017/S1474746422000070
August 2018	**Blog:** *'Welfare Imaginaries: Reflections from the first seminar'*, available from https://welfareimaginaries.wordpress.com/2018/08/01/welfare-imaginaries-reflections-from-the-first-seminar/
December 2017	**Blog:** *'Reflections on the 'large' families, poverty & welfare reform conference'*, available at: https://largerfamiliespovertywelfarereform.wordpress.com/2017/12/05/reflections-on-the-large-families-poverty-welfare-reform-conference-nancy-evans/

Conference papers

September 2019	'Exploring stigma and resistance in the lives of women who claim means-tested benefits', Critical Welfare State Studies Network Conference: Critical Perspectives on Stigma, Shame and the Irish Welfare Imaginary, University College Cork
September 2019	'Stigma and resistance in the everyday lives of women who claim benefits', *School of Law and Social Justice Annual Postgraduate Conference*, University of Liverpool
April 2019	'Examining the place of stigma in the lives of women who claim social security benefits: structural constraints and agential responses', *British Sociological Association Annual Conference*, Glasgow Caledonian University
July 2018	'Exploring women's experiences of benefits stigma', *School of Law and Social Justice Annual Postgraduate Conference*, University of Liverpool
April 2018	'Exploring the dynamics of contemporary benefits stigma', *British Sociological Association Annual Conference*, Northumbria University

September 2017	'Exploring contemporary benefits stigma: Theories of stigma from Goffman and beyond', *School of Law and Social Justice Annual Postgraduate Conference*, University of Liverpool

Policy engagement

March 2020	**Submission of evidence:** (based on PhD fieldwork) to the *House of Commons Work and Pensions Select Committee* inquiry, 'Universal Credit: The wait for a first payment'
July 2019	**Collaborative workshop:** Proposals for the next UK White Paper on social security, organised by Michael Orton, Sheffield