

STOKE YOUR GRATITUDE

C.I.C.

SONGBOOK FOR TACKLING HEALTH INEQUALITIES

SHOWCASE EDITION | 2026

Real stories. Real people. Real change.

**5 SONGS. 5 STORIES. 5 STEPS TOWARDS
CHANGE.**

1

THE FENCE OR THE AMBULANCE

2

MONEY FOR MANGOES

3

WEIGHT AND WORTH

4

WHERE DO I GO?

5

THE POTTERIES DON'T BREAK

www.StokeYourGratitude.org.uk

Funded by VAST's Tackling Health Inequalities Grants
Programme

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Listen to these songs on StokeYourGratitude.org.uk.
Songs for healthier lives, stronger communities, and a
fairer Stoke-on-Trent. Real stories. Real voices. Real
change. Listen. Learn. Share. Change. Thank you for
listening. Thank you for caring.

SONG 1

The Fence or the Ambulance:

The Lyrics

Poem by Joseph Malins (1895)

Folk Theme: Prevention versus cure

1

'Twas a dangerous cliff, as they freely confessed,
Though to walk near its crest was so pleasant; But
over its terrible edge there had slipped
A duke and full many a peasant.

2

So the people said something would have to be done,
But their projects did not at all tally;

Some said, "Put a fence 'round the edge of the cliff,"
Some, "An ambulance down in the valley."

3

But the cry for the ambulance carried the day,
For it spread through the neighboring city;
A fence may be useful or not, it is true,
But each heart became brimful of pity
For those who slipped over that dangerous cliff;
And the dwellers in highway and alley
Gave pounds and gave pence, not to put up a fence,
But an ambulance down in the valley.

4

"For the mischief, of course, should be stopped at its
source,"
Come, neighbors and friends, let us rally;
If the cliff we will fence, we might almost dispense
With the ambulance down in the valley."

5

“Oh he’s a fanatic,” the others rejoined,
“Dispense with the ambulance? Never!
He’d dispense with all charities, too, if he could;
No! No! We will support them forever.
Aren’t we picking up folks just as fast as they fall?
And shall this man dictate to us? Shall he?
Why should people of sense stop to put up a fence,
While the ambulance works in the valley?”

6

But a sensible few, who are practical too,
Will not bear with such nonsense much longer;
They believe that prevention is better than cure,
And their party will soon be the stronger.

Encourage them then, with your purse, voice, and pen,
And while other philanthropists dally,

They will scorn all pretense and put up a stout fence
On the cliff that hangs over the valley.

7

Better guide well the young than reclaim them when old,
For the voice of true wisdom is calling:

“To rescue the fallen is good, but ’tis best
To prevent other people from falling.”

8

Better close up the source of temptation and crime
Than deliver from dungeon or galley;
Better put a strong fence ’round the top of the cliff,
Than an ambulance down in the valley.

Activity Boxes

What this song is about:

Favourite line:

Draw your favourite idea from the song!

SONG 1

The Fence or the Ambulance:

What This Means

Poem by Joseph Malins (1895)

Folk Theme: Prevention versus cure

ANNOTATIONS

What the lyrics mean in a health context, with evidence.

1

The “cliff” is a crisis.

What does this represent?

2

“Put a fence” means invest in prevention—early action to stop problems before they happen.

Give an example.

3

The “ambulance” is the emergency response.

What does this mean for people now?

4

The song calls on everyone to work together.

How can we support prevention, not just react?

EVIDENCE AND REFERENCES

Find the evidence. Add details, quotes, or links to sources.

REFERENCES

1

Marmot, M. (2010).

Fair Society, Healthy Lives: The Marmot Review.

London: UCL Institute of Health Equity.

2

World Health Organization (2022).

Health Promotion Glossary.

Geneva: WHO.

3

The Health Foundation (2019).

Spending Review: Health and Prevention.

London: The Health Foundation.

4

Public Health England (2017).

Prevention is Better Than Cure.

London: PHE.

REFLECTION AND DISCUSSION

Take some time to think, write, or talk about...

- Do you see more focus on fixing problems or preventing them in your area?
- What could be done earlier to stop health problems happening?
- Who decides whether we build 'fences' or fund 'ambulances'?
- What would a prevention-first approach look like in your community?

KEY CONCEPTS

Match the concepts to the descriptions.

Concepts

- Prevention versus cure
- Upstream intervention
- Systems thinking

Descriptions

- Action taken at the root cause of a problem, before harm occurs.
- Preventing problems early is usually easier, kinder and cheaper than treating them after they happen.
- Looking at how different parts of a system (health, housing, education, income) connect and affect each other.

My big takeaway...

One small action I can take...

Every little action builds a healthier future.

SONG 2

Money for Mangoes

**Toytronica | Food Insecurity and Economic
Inequality**

**“I WANNA BE A HEALTHY GIRL, BUT IT CAN BE
EXPENSIVE.”**

INTRO

Why can't we give
Money for mangoes?

Why can't we give
Money for mangoes?

VERSE 1

Money for mangoes

Cantaloupe and bananas

Plums and cherries

Grapes and guavas

Strawberries, papayas

And oranges

We got money for all of it

CHORUS

The world has money

Money for missiles, money for bombs

Money for guns

But they can't give me money for mangoes

Money for mangoes

VERSE 2

I got a sweet tooth for all types of berries

In all of my food, I put black cherry

I like blueberries, blackberries

And raspberries

But I can't always buy them

CHORUS (REPEAT)

The world has money

Money for missiles, money for bombs

Money for guns

But they can't give me money for mangoes

Money for mangoes

OUTRO

I wanna be a healthy girl

But it can be expensive

And that's how it is for everyone else

Why can't we give money for mangoes?

Sign Text

HEALTHY FOOD SHOULDN'T BE A LUXURY

FOOD IS A RIGHT, NOT A PRIVILEGE.

THINK ABOUT IT...

What does this song make you think about?

How does it make you feel?

What are some changes you'd like to see?

Who could help make those changes happen?

My favourite lyric and why...

Healthy food today, healthier tomorrow!

SONG 2

Money for Mangoes:

What This Means

Toytronica | Food Insecurity and Economic Inequality

“I wanna be a healthy girl, but it can be expensive.”

ANNOTATIONS

1

The Food Foundation’s Broken Plate 2025 report found the poorest fifth of UK households would need to spend 45% of their disposable income to afford the government’s recommended healthy diet, rising to 70% for households with children. Healthier food is now more than twice as expensive per calorie as less healthy food, and that gap is widening.

2

“But I can’t always buy them” is the key line. The desire for healthy food is there. The barrier is economic, not behavioural. The problem is systemic, not personal.

3

In Stoke-on-Trent, around 20,000 people a year rely on the Trussell Trust foodbank for emergency food. This is a measure of how far the economic barrier to healthy eating extends in this city.

EVIDENCE AND REFERENCES

SOURCE

Food Foundation (2025)

The Broken Plate 2025.

<https://foodfoundation.org.uk/publication/broken-plate-2025>

DETAIL

The poorest fifth of UK households need 45% of disposable income to afford a healthy diet, rising to 70% for households with children. Healthier food is more than twice as expensive per calorie as less healthy food.

Stoke-on-Trent Foodbank / Trussell Trust (2023)

<https://stokeontrent.foodbank.org.uk>

DETAIL

Over 20,000 people a year rely on the Stoke-on-Trent foodbank for emergency food.

Etherington, Fox, Hubbard, Browne and McCluskey (2025)

https://eprints.staffs.ac.uk/9449/1/CA_Uni%20Report%20on%20Poverty%202025%20DE_MJ%20Final%205.12.25.pdf

DETAIL

The evidence shows that the desire to meet basic needs is present, but affordability is the limiting factor, indicating an economic and systemic problem rather than an individual behavioural one.

KEY CONCEPTS

Food insecurity

Not having reliable access to enough affordable, healthy food.

Economic inequality

Differences in income and wealth that directly affect health outcomes.

Social determinants

The conditions people live in, housing, work, income, education, that shape health.

REFLECTION AND DISCUSSION

- What makes it hard for people to eat well where you live?
- How does money affect what people can eat?
- What would make healthy food easier for everyone to get?
- What does this song say about where priorities lie?

My big takeaway...

One small action I can take...

Healthy food should be a right, not a luxury.

SONG 3

Weight and Worth

Indie | Weight Stigma, Healthcare Bias, and Dignity

“I may be big but my worth isn’t small.”

VERSE 1

Went to the GP after watching the game,

Walked in with a stomach ache, gave my name,

Sat down waiting, thinking I’d be seen,

First they point me to the scale, their routine.

Told the doctor, “It’s my stomach, a pain I can’t shake,”

She nodded, then asked, “Thought about your weight?”

I came for help with my pain, but that’s not what I got,

Left with diet advice, my stomach in a knot.

CHORUS

Don't base my treatment on your thoughts of my weight,

Don't ignore my symptoms until it's too late,

I came here hurting, I came here real,

Listen to me as a person and the way I feel.

VERSE 2

They say, "Just eat less, exercise more,"

Like I haven't heard that a thousand times before,

If it worked like that I'd be half my size,

When will they see that's not good advice.

CHORUS

Don't base my treatment on your thoughts of my weight,

Don't ignore my symptoms until it's too late,

I came here hurting, I came here real,

Listen to me as a person and the way I feel.

BRIDGE

I put off the doctor, I try not to go,

When stepping inside means I'm judged on the show.

Forget about willpower, it's about the gap,

Between who gets real help and who falls off the map.

CHORUS

Don't base my treatment on your thoughts of my weight,

Don't ignore my symptoms until it's too late,

I came here hurting, I came here real,

Listen to me as a person and the way I feel.

VERSE 3

Weigh your words before you speak,

Don't save proper treatment for the slender and sleek,

I may be big but my worth isn't small,

Don't make me regret coming here at all.

THINK ABOUT IT...

- What does the song say about healthcare experiences?
- How do you think weight bias affects people's health and wellbeing?
- What would respectful, person-centred care look like?
- What can we do to challenge weight stigma in our communities?

MY PROMISE

One thing I can do to support dignity and equal care for everyone:

Clipboard Text

YOU MATTER.

- Your health.
- Your story.
- Your worth.

Reflection Boxes

What does this song mean to you?

Favourite lyric and why...

Everyone deserves to be heard. Everyone deserves good healthcare.

SONG 3

Weight and Worth:

What This Means

Indie | Weight Stigma, Healthcare Bias, and Dignity

“I may be big but my worth isn’t small.”

ANNOTATIONS

1

Brown, Flint and Batterham (2021) found that people in larger bodies in England face “disparate healthcare experiences” and are often dismissed and stigmatised before being heard. Weight bias is one of the most commonly reported forms of discrimination in healthcare. Community Health Champions (CHCs) can help people feel entitled to say:

“I’d like to talk about what brought me here today, before anything else.”

2

Tomiyama et al. (2018) found weight stigma itself drives worse health through stress, avoidance of care, and disordered eating. From a Health At Every Size® (HAES®) perspective (Bacon & Aphramor, 2011), CHCs can support people to name their actual concern before an appointment, and to ask:

“What would you recommend for someone without my body size, with the same symptoms?”

3

Around 30% of children in Year 6 in Stoke-on-Trent are classified as above a “healthy weight”, more than double the rate in the least deprived areas nationally. From a HAES perspective, this reflects the harm of poverty measured on a scale. CHCs can help parents

understand that school weigh-in letters are not a verdict, and that they can ask their GP to focus on their child's overall wellbeing.

4

Weight stigma causes measurable harm and makes people less likely to seek care (Tomiyama et al., 2018; BJGP, 2019). CHCs can keep people connected to healthcare despite negative experiences, validating what happened, helping prepare for the next appointment, and affirming that everyone deserves care regardless of body size.

EVIDENCE AND REFERENCES

Source: Brown, Flint & Batterham (2021).

eClinicalMedicine.

[https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370\(21\)00420-X/fulltext](https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(21)00420-X/fulltext)

Detail: People in larger bodies face widespread discrimination from healthcare workers, including being dismissed before being heard.

Source: **Tomiyama et al. (2018). BMC Medicine.**

<https://bmcmmedicine.biomedcentral.com/articles/10.1186/s12916-018-1116-5>

Detail: Weight stigma leads to exercise avoidance, disordered eating, depression, and barriers to care.

Source: **Bacon & Aphramor (2011). PLoS Medicine.**

<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1001197>

Detail: Foundational HAES evidence: weight-inclusive approaches improve health outcomes without focusing on body size.

Source: **GOV.UK (2024). National Child Measurement Programme.**

<https://fingertips.phe.org.uk/profile/national-child-measurement-programme>

Detail: Year 6 above “healthy weight”: 30.2% in Stoke-on-Trent; more than double most vs least deprived areas nationally.

Source: **BJGP (2019). Weight Bias and Stigmatisation.** <https://bjgp.org/content/69/684/349>

Detail: Weight bias is one of the most common forms of discrimination reported in healthcare.

KEY CONCEPTS

Weight stigma

Judging or treating people unfairly because of their body size.

Healthcare bias

When people are treated unfairly in healthcare because of assumptions about them.

Health equity

Making sure everyone has a fair chance to be healthy, based on their needs.

REFLECTION AND DISCUSSION

- What has your own experience, or the experience of people you support, been like when raising a health concern at a GP appointment?
- The song says:

“I came here hurting, I came here real, listen to me as a person and the way I feel.”

What gets in the way of that happening?

- How might you support someone to prepare for, or recover from, a healthcare appointment where they felt dismissed?
- What would it mean to separate someone's body size from their worthiness of care?

My big takeaway...

One small action I can take...

Everyone deserves care and respect, no matter their body size.

SONG 4

Where Do I Go?

**Soul / Afrobeat-folk | Refugee and Asylum Seeker
Mental Health**

**“I’ve got the words but they’re not in your tongue.
Where do I go? I’m not the only one.”**

VERSE 1

I crossed the water, I crossed the night,
Carried my memories, held them tight,
Found a city of bottles and clay,
But the door to help seems far away.

CHORUS

Where do I go when my mind needs rest?

Where do I go with this weight in my chest?

I've got the words but they're not in your tongue,

Where do I go? I'm not the only one.

VERSE 2

The form says "phone" but my credit's run dry,

The waiting list stretches across the sky,

They say "we'll call you," but the weeks roll on,

And the person I was feels almost gone.

CHORUS

Where do I go when my mind needs rest?

Where do I go with this weight in my chest?

I've got the words but they're not in your tongue,

Where do I go? I'm not the only one.

BRIDGE

At Asha they said, "Sit down, have some tea,"

First time in months someone listened to me,

A cup and a chair and a little bit of time,

That's where the healing starts to climb.

FINAL CHORUS

Now I know where to go when my mind needs rest,

Now I know I can speak what's inside my chest,

We've got each other and that is enough,

We know where to go, and the road's made of trust.

VERSE

Weigh your words before you speak,

Don't save proper treatment for the slender and sleek,

I may be big but my worth isn't small,

Don't make me regret coming here at all.

THINK ABOUT IT...

- What does this song say about seeking help?
- How do language and systems create barriers?
- What gave the singer hope?
- Who or what are the “Asha” places in your community?

MY PROMISE

One way I can create a more welcoming and supportive community for people who are new here:

GOOD TO KNOW

- It's okay to ask, "How can I help?"
- Listening without judgement matters.
- Small acts of kindness can make a big difference.
- Everyone deserves safety, support and belonging.

Banner Text

SAFETY

SUPPORT

BELONGING

Bunting Text

WELCOME • RESPECT • DIGNITY • HOPE

Reflection Boxes

My favourite lyric and why...

One small action I can take...

Kind words. Open hearts. Stronger together.

SONG 4

Where Do I Go?

What This Means

**Soul / Afrobeat-folk | Refugee and Asylum Seeker
Mental Health**

**“I’ve got the words but they’re not in your tongue.
Where do I go? I’m not the only one.”**

ANNOTATIONS

1

Phone credit, digital poverty, and online-only systems create real barriers for people navigating an unfamiliar system when English is an additional language for them.

2

ASHA in Stoke-on-Trent provides frontline support. Sanctus at the YMCA and St. Mark's Church offer food, English tuition, and basic supplies. These community organisations often provide the first consistent, locally-rooted human connection.

ASHA — Support

SANCTUS @ YMCA — Food, Basic supplies

ST. MARK'S CHURCH — English tuition

3

Refugees and asylum seekers are at higher risk for PTSD, depression and anxiety. Community-based support can provide a pathway when formal services are inaccessible.

“You are not alone.”

EVIDENCE AND REFERENCES

Source: **British Red Cross (2023)**

<https://www.redcross.org.uk/about-us/what-we-do/we-speak-up-for-change/how-digital-exclusion-impacts-access-to-healthcare-for-people-seeking-asylum-in-the-uk>

Detail: Digital exclusion can prevent people seeking asylum from booking appointments, ordering prescriptions, or navigating to appointments, with some participants avoiding help altogether or using A&E as their only option.

Source: **BMA (2025). Managing Language Barriers.**

<https://www.bma.org.uk/advice-and-support/ethics/refugees-overseas-visitors-and-vulnerable-migrants/refugee-and-asylum-seeker-patient-health-toolkit/managing-language-barriers-for-refugees-and-asylum-seekers>

Detail: Patients with limited English language or literacy can find it difficult to engage with NHS services.

Refugees and asylum seekers may need ongoing language interpretation support to engage effectively.

Source: **Royal College of Psychiatrists (2024)**

<https://www.rcpsych.ac.uk/international/humanitarian-resources/asylum-seeker-and-refugee-mental-health>

Detail: Refugees and asylum seekers experience depression at around 31% and PTSD at around 31%, substantially higher than the general population.

Language barriers and long waits persist.

Source: **Healthwatch England (2026)**

<https://www.healthwatch.co.uk/blog/2026-02-24/refugee-and-asylum-seekers-experiences-using-nhs>

Detail: Ongoing difficulties understanding how the NHS works and what people are entitled to, reliance on hosts/sponsors for things like GP registration, and interpretation services that are often unavailable, including in specific dialects or when conversational English is incorrectly assumed to be sufficient.

KEY CONCEPTS

Refugee health

The health needs of people forced to leave their country, including trauma and language barriers.

Language barriers

Difficulties accessing services because of language differences.

Access to care

Being able to get the health support you need.

REFLECTION AND DISCUSSION

- What makes it hard for someone new to this country to get help?
- How might it feel to not understand the system or language?
- What helps people feel safe asking for support?
- What does “the road’s made of trust” mean to you?

My big takeaway...

One small action I can take...

Signpost Text

SAFETY

SUPPORT

BELONGING

Closing Message

Everyone deserves safety, support and respect.

SONG 5

The Potteries Don't Break

What This Means

**Anthemic Indie-Folk | Health Inequality and
Community Resilience in Stoke-on-Trent**

**“We’ve been fired in the furnace, glazed by what
we’ve faced, and the Potteries don’t break.”**

VERSE 1

They made the plates that fed the world from here,

Fired in the kilns through every single year,

Now the smoke’s cleared but the struggle stays,

Fourteen on the deprivation league, still fighting every
day.

CHORUS

But the Potteries don't break,

No, the Potteries don't break,

We've been fired in the furnace, shaped by what we've
faced,

And the Potteries don't break.

VERSE 2

Eight years difference between one street and the next,

Half the city in the most deprived index,

But we've got VAST, we've got each other's backs,

Community Health Champions filling in the cracks.

CHORUS

And the Potteries don't break,

No, the Potteries don't break,

We've been fired in the furnace, shaped by what we've
faced,

And the Potteries don't break.

BRIDGE

From Tunstall down to Longton, Burslem to Fenton too,

Six towns, one heart, and we will see it through,

Songs for health equality, that's what we sing,

Hide the vegetables in the cake and let the music ring.

FINAL CHORUS

The Potteries don't break,

No, the Potteries don't break,

We've been fired in the furnace, glazed by what we've
faced,

And the Potteries don't break.

THINK ABOUT IT...

- What does this song say about the history of our city?
- How does the song show the link between poverty and health?
- Where have you seen people come together to support their community?
- How can creativity and songs help us talk about big issues?

MY PROMISE

One way I can help build a healthier, fairer Stoke-on-Trent:

GOOD TO KNOW

- We can make change together.
- Small steps add up to big change.
- Everyone has a role in building healthier communities.
- Your voice, your ideas and your kindness matter.

Signpost Text

TUNSTALL

BURSLEM

HANLEY

LONGTON

FENTON

STOKE

Footer Text

Six towns, one heart.

Stronger together

The Potteries don't break. We care. We share. We change.

Reflection Boxes

My favourite line and why...

One small action I can take...

SONG 5

The Potteries Don't Break:

What This Means

**Anthemic Indie-Folk | Health Inequality and
Community Resilience in Stoke-on-Trent**

**“We’ve been fired in the furnace, glazed by what
we’ve faced, and the Potteries don’t break.”**

ANNOTATIONS

1

Stoke-on-Trent is in the 20% most deprived districts/unitary authorities in England; depending on the IMD 2019 summary measure used, it ranks between 13th and 16th (PHE, 2019; MHCLG IMD 2019).

Top 20% most deprived

2

Life expectancy is 8.2 years lower for men and 7.2 years lower for women in the most deprived areas of Stoke-on-Trent compared with the least deprived areas (PHE, 2019).

8.2 years lower

7.2 years lower

3

The six towns of the Potteries are named as a statement of unity. “Hide the vegetables in the cake” is the wider project: using creative approaches to make health inequality concepts accessible.

**TUNSTALL • BURSLEM • HANLEY • LONGTON •
FENTON • STOKE**

Creative ways to make change

4

The final chorus shifts from “**shaped**” to “**glazed**”, a pottery term for finished and made beautiful. The community has not just survived hardship; it has been made stronger by it.

EVIDENCE AND REFERENCES

Source: **Public Health England (2019). Health Profile: Stoke-on-Trent.** <https://fingertips.phe.org.uk/static-reports/health-profiles/2019/E06000021.html>

Detail: “Stoke-on-Trent is one of the 20% most deprived districts/unitary authorities in England.” Life expectancy is 8.2 years lower for men and 7.2 years lower for women in the most deprived areas of Stoke-on-Trent than in the least deprived areas.

Source: **Etherington, Fox, Hubbard, Browne and McCluskey (2025).**

https://eprints.staffs.ac.uk/9449/1/CA_Uni%20Report%2

0on%20Poverty%202025%20DE_MJ%20Final%205.12.25.pdf

Detail: “The poverty crisis in Stoke-on-Trent has worsened.” Austerity (cuts to welfare, social security and public services) combined with the cost-of-living crisis is driving poverty, destitution and health inequality in the city.

Source: **NHS Staffordshire and Stoke-on-Trent ICB (2024). Tackling Health Inequalities Strategy 2024–2029.** <https://staffsstoke.icb.nhs.uk/your-nhs-integrated-care-board/our-publications/improving-population-health/tackling-health-inequalities-strategypdf/>

Detail: Sets ICB priorities for reducing health inequalities across the system, including action on the wider determinants of health.

Source: **VAST (Voluntary Action Stoke-on-Trent).** <https://vast.org.uk>

Detail: Supports the VCSE sector across Stoke-on-Trent and North Staffordshire. Coordinates the Community

Health Champions programme via the Healthy Communities Alliance, and funded this songbook through its Tackling Health Inequalities work.

KEY CONCEPTS

Health inequalities

Unfair and avoidable differences in health between groups, driven by social and economic conditions.

Community resilience

The ability of a community to support each other and respond to challenges.

Wider determinants

The broad conditions that shape health: income, housing, education, employment, environment.

REFLECTION AND DISCUSSION

- What does “the Potteries don’t break” mean to you?
- Where do you see community resilience in your area?
- What would it take to close the life expectancy gap?
- How can songs like this start conversations about health inequality?

My big takeaway...

One small action I can take...

Closing Message

Stronger together. Health for all.