

#### Learning Objectives



By the end of this session, participants should be able to:

- Recall the nature of stigma and some of the challenges in addressing it
- Summarize the negative impact of stigma on accessing care and long term recovery
- Recognize how the language we use has an impact on treatment success

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# Why is it Important to Talk About Bias **CHAMP** and Stigma?



Stigma – a mark of disgrace associated with a particular circumstance/quality or person

- Shame does not motivate positive change
- Judgment increases the burden on people who are already suffering
- Stigma is literally a killer
- BUT WHY IS IT SO HARD

### Function of Stigma and Stereotyping



- Stigma Sorting people into ingroups and out-groups
- Social process by which social groups are devalued rejected and excluded
- Stereotyping
- Negative, group-based attitudes and discrimination are justified by a widely held, oversimplified image of a person



## Why Do We Stereotype and Label?



- · Blaming individuals is easier than contemplating societal issues
  - Adverse childhood experiences
- Structural oppression and white supremacy
- Categorizing helps the brain to make sense of complex information
  - $\bullet$  "I've seen one, so I've seen them all "

#### What Stigma Does to People



- Exquisite sensitivity to rejection
- Social withdrawal and avoidance of opportunities for help
- Low self esteem/suicidal ideation
- Actual experience of devaluation and discrimination, horizontal hostility



openDemocracy, Power

Stigma and Treatment Keyes, Hatzenbuehler et al., Am J of Epi 2010, 172(12) 1364-1372 2010

Stigma Power. Link and Phelan. Soc Sci and Med 103 (2014) 24-32

# Enduring Consequences for Clients



- Challenges to seeking care
- Higher perception of societal stigma directly reduced the likelihood of accessing services
- Impacts on successful recovery
  - Stigma continues to impact people who are in recovery and threatens their success



On stigma and its consequences. Evidence from a Langitudinal Study of Men with Dual Diagnosis of Menta illness and Substance Abuse. Link, Streuning et al. J of Heal and Soc Beh 1997, Vol #8 (June) 177-190

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#### ADAI Washington State Syringe Exchange Health Survey: 2017 Results



- Reasons for not getting needed medical care
- 33% of respondents "don't trust/like doctors"
- 26% "don't want to be lectured/judged about drug use"

https://adal.uw.edu/pubs/pdf/2017syringeexchangehealthsurvey.p

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# Physicians' Beliefs



- 37% of primary care physicians believed that drug addiction was "somewhat or a lot" a result of moral failings
- Simultaneously 87% reported drug addiction as a disease

Physicians' Beliefs about the Nature of Addiction: A Survey of Primary Care Physicians and Psychiatrists Lawrence et al., Am J of Addictions, 22, 255-260 2013

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#### Clinical Impact of Biased Language



- Myth of medical record as objective space
- We can inadvertently pass on stigma in our chart note and perpetuate clinician bias
- Choices in words, descriptive language and client quotes
  - Directly impact future treatment decisions and quality of care

Does it matter how we refer to individuals with substance—related conditions? A randomized study of two commonly use terms. Kelly and Westerhoff, Int I Drug Pol, 21(3) May 20(1) of Owards matter? Stigmatting Language and the Transmission of Bias in the Medical record. Goddu et al., I Gen Intern Med,

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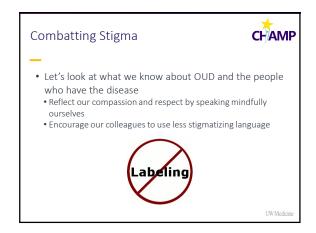
#### Unconscious Bias and Language



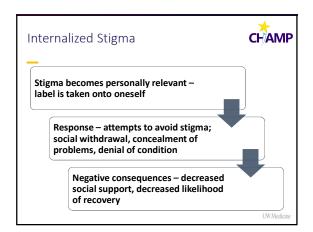
- Sometimes just the words we use have a bigger impact than we think
- A commonplace term to us might evoke prejudice and bias in others
- Words have powerful positive and negative associations that evoke feeling and action

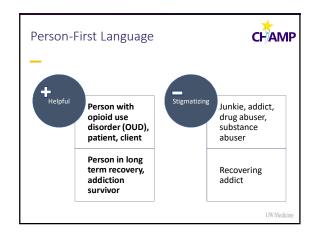
Substance use, recovery and linguistics: The impact of word choice on explicit and implicit bios. Ashford et al, Drug And Alc Dep, 189, June 2018

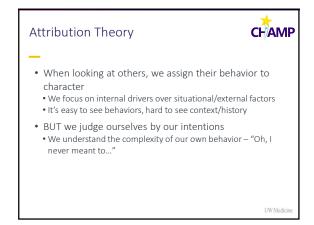
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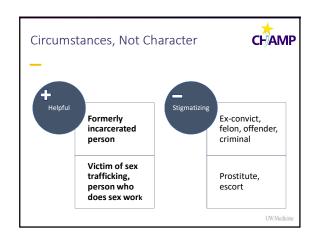




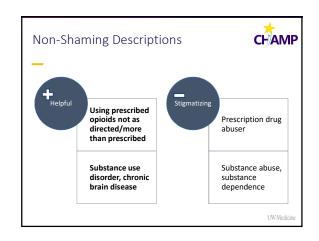




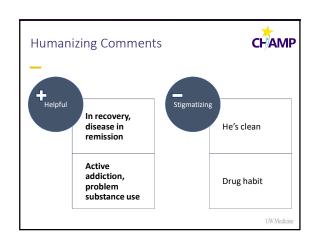




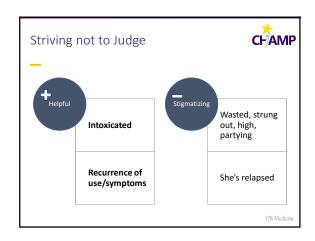


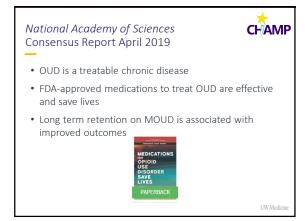


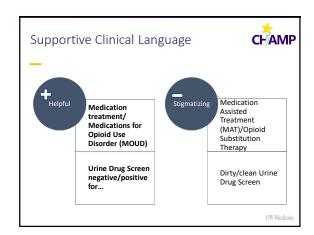




People with any serious health condition deserve to
Understand the condition and treatment options
Understand they can make choices about care
Be actively involved in making decisions
Full spectrum of support services tailored to patient's choice should be offered







# Discussion CHAMP

- Why is it hard for us (and our colleagues and our patients) to change our language around substance use disorders?
- Did you find any of the suggested language odd or awkward (or stupid!)?
- Recovery Dialects handout

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