Designing a cross-disciplinary language guide to reduce stigma in healthcare: a lived and living experience approach

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Background:
Language used in healthcare shapes how patients are perceived, treated, and whether they feel safe to engage in care. Stigmatising language contributes to inequitable healthcare experiences, particularly for people experiencing challenges with alcohol and other drug use, mental health challenges, homelessness, and suicidality. Existing language guides are often siloed, limiting their accessibility and impact across healthcare settings.

Description of Model of Care/Intervention:
This project applies an Improvement Science approach within a public hospital to identify and address stigmatising language and communication practices. A mixed-methods approach includes observation of communication practices and patient and staff surveys exploring experiences of respect, inclusion, and stigma in healthcare settings.
The intervention involves designing a comprehensive, cross-disciplinary Language Guide integrating guidance from drug health, mental health, homelessness, and suicidality into a single practical resource informed by lived and living experience expertise.

Effectiveness/Acceptability/Implementation:
Findings indicate that stigmatising language occurs across multiple settings, including clinical notes, handovers, and informal communication. Feedback from Consumer Advisory Group members and peer workers highlight the importance of respectful language in shaping trust and engagement. Staff report the prevalence and impact of stigmatising language. The concept of an integrated Language Guide has been positively received as a practical and accessible resource.

Conclusion and Next Steps:
This project demonstrates the value of centring lived and living experience as a driver of system change in stigma reduction. Next steps include taking the draft of the guide to the Consumer Advisory Groups for feedback, management approval, implementation testing, evaluation of communication practices, and exploration of broader health service adoption.

Implications on communities, practice, policy and/or First Nations communities:
This work offers a practical and scalable approach to reducing stigma and advancing more equitable, person-centred, and culturally safe healthcare.

Disclosure of Interest Statement:
The author reports no conflicts of interest.