



Decreasing Stigma Using Mindful & Ethical Communication

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LEARNING OBJECTIVES

- Why documentation matters and what is the impact of words?
- How the impact & health outcomes in documentation are often rooted in stigma & bias.
- Using person-centered language to create more equitable and dignified communication, thus increasing the desire to seek healthcare and housing.
- Strategies to implement more mindful & ethical communication.



WE ALL DOCUMENT!

Total Time Spent Editing	Title/Description	Notes



INTENT VS. IMPACT







IMPACT OF WORDS (EXAMPLES)



COMPLIANT

DENIED

REFUSED

COMPLAINED

IGNORED





SIMPLE WORDS HAVE BIG IMPACTS

COMPLIANT:

The individual in question is 'willing to do what other people want them to do' or 'used to describe something that obeys a particular rule or law'.

Consequence: If this word is used in the negative form, noncompliant, such as a reference to a client not taking medications, the choice implies they are not following the rules.



REAL DOCUMENTATION!





"XXXX walked in and out through the lobby a few time talking shit to staff as he passed by."



"XXXX walked in the building and made a jerking off motion with his hand towards staff before continuing upstairs. Logging because it was gross."



"The shift started with an emergency situation with bad choices made by a resident that almost got deadly, the paramedics were called, and they saved a life tonight."



"The hospital called and said they just discharged XXXX, but they are writing a DCR order court up for her. They said she seemed to be very whacky and asked if that's her normal."



"I told him to go to his room."



"XXXX played in his rectum for the duration of the sweep."



Yeah... Not Good.





PERSON CENTURED LANGUAGE

Not Trauma Informed

Alcoholic/Addict

Addict/Addiction

Junkie

Clean/Sober

Drug Abuse

Overdose

Relapse

Mentally Ill/Schizophrenic/BiPolar

Trauma Informed

Alcohol Use Disorder/Opioid Use Disorder

Substance Use Disorder (SUD)

Someone with a SUD

Abstinent

Someone who misuses substances

Acute/unintentional substance poisoning

Return to use

Someone w/ (Mental illness, Bipolar Disorder,

Schizophrenia)



TRANSMISSION BIAS

"...bias can be propagated from one clinician to another, further impairing healthcare quality for the individual patient as well as entrenching healthcare disparities overall for those who are stigmatized" (P. Goddu et al., 2018)

This idea can be applied to housing staff, case managers and the notes or logs that are written by staff that work with individuals housed in permanent supportive housing sites



SYMPTOM STIGMATIZATION

Targeting behaviors of clients that are a natural consequence of their diagnosis

- Somebody who is living with opioid use disorder and the documentation states the individual made 'bad choices.'
- Logging an inappropriate gesture as 'gross'
- Describing behavior in detail that has no value to the record



SYMPTOM STIGMATIZATION

"Value judgments informed by feelings about a patient should not appear in the medical record." (P. Goddu et al., 2018)

(Applies to all documentation)



DIAGNOSTIC CRITERIA

Impulsivity

Extreme Sarcasm

Bitterness

Irritability Verbal Outbursts Physical Fights

Borderline Personality Disorder

Feeling Shame

Feeling Evil Feeling Bad

Paranoid Ideation

Self-Mutilating

Chronic Feelings

Feeling Guilt

Recurrent Physical Fights

of Emptiness

Identity Disturbance

Unstable and Intense Interpersonal Relationships



DIAGNOSTIC CRITERIA

 Marked by "inappropriate, intense, or difficulty controlling anger (frequent displays of temper, constant anger, or recurrent physical fights)

 Some of these individuals are prone to extreme sarcasm, bitterness, and verbal outbursts



DIAGNOSIS AND LINKED BEHAVIORS

- Behaviors exhibited by clients are often directly linked to a client's diagnosis
- Document neutrally and without judgment to avoid symptom stigmatization

We are all in the business of caring for highly stigmatized populations, but if we do not check ourselves, we can become contributors of the stigmatization that surrounds mental health, homelessness, and substance use disorders



PAUSE AND REFLECT

What happens if we let value judgments into documentation?

"How would I feel if this were written about me?" (Fernandez et al., 2021).

"How might this sound if read by this patient?" (Fernandez et al., 2021).

Loss of housing – Negative health outcomes

DESC APPROVED ICONS TO COPY/PASTE IF YOU SEE FIT



































