



# Stigma Harms People Every Day

## An Introduction to Identifying & Addressing Implicit Bias

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WELCOME

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# HOUSEKEEPING



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# STIGMA HARMS PEOPLE EVERY DAY

An Introduction to Identifying and Addressing Implicit Bias

Malika Lamont BA,MPA



# Working Definitions

- Stigma: A strong lack of respect for a person or a group of people or a bad opinion of them because they have done something society does not approve of.

Source: Cambridge Dictionary

- Implicit Bias: Also known as implicit social cognition, implicit bias refers to the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner.

Source: The Ohio State University Kirwan Institute for the Study of Race and Ethnicity

- Intersectionality Theory: People are often disadvantaged by multiple sources of oppression: their race, class, gender identity, sexual orientation, religion, and other identity markers

Source: This particular definition YW Boston. Original Concept Dr. Kimberle' Crenshaw

# Prohibition Is A Problem

- An environment of exclusion exacerbates the already difficult situation of SUD
- Creates a “black market,” violence, and unregulated drug supply
- Discourages the development of and adoption of effective treatment
- Turns a health issue into legal issue and a “moral failing”

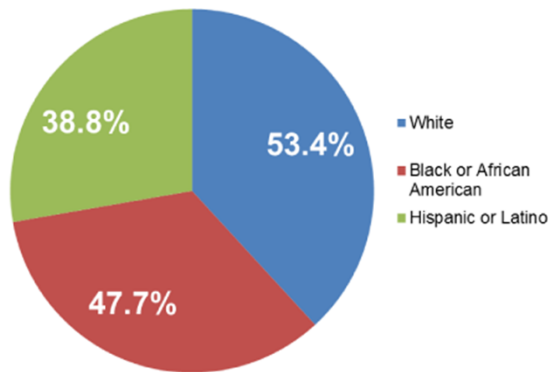


# Prohibition Is A Problem

- 56-90 percent of drug users will be imprisoned at some point in their life (Avert 2015)
- Criminalization of drug users fuels risky behaviors and overdose
- Criminalization marginalizes vulnerable and traumatized people
- Incarceration of drug users interrupts important health care benefits and access to medication assisted treatment

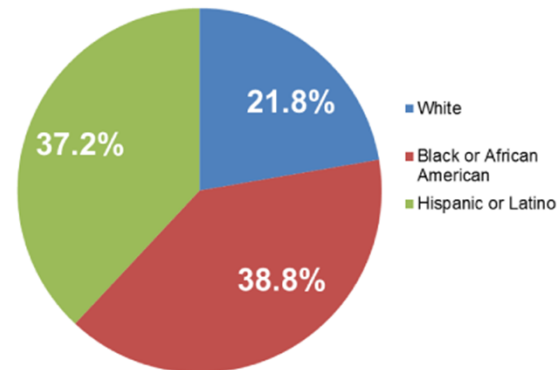
# Mass Incarceration Increases Stigma

**Illicit Drug Use in Lifetime, Past Year, and Past Month among Persons Aged 12 or Older, by Race: Percentages, 2015**



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2014 and 2015.

**Demographic characteristics of federally sentenced drug offenders in the Federal Bureau of Prisons, year 2012**



Source: Bureau of Justice Statistics, based on data from U.S. Sentencing Commission, fiscal years 1994–2012; and Federal Bureau of Prisons, SENTRY data base, fiscal yearend 2012.



# Why Does It Matter What A Provider Thinks About Their Patient's Behavior?

When Stigma and Bias become discriminatory behavior they are social determinants of health:

- Patients are marginalized out of healthier behaviors and health care settings
- Health Disparities Increase
- Health Outcomes Decline
- Costs Increase
- Health Inequity Increases
- Patient Care is Compromised

# Patients Experience Discrimination in Health Care Settings

- Doctors empathize less with patients they perceive as different from themselves
- Care providers are less likely to prescribe pain medication to People of Color than White people even for the same or similar injuries
- Maternal child death rates for Black women are extremely disproportionately higher than for White women
- The U.S. has the highest maternal child death rate of any developed country
- The unfair treatment of a person belonging to a stigmatized group, based on perceived differences, can lead a stigmatized individual to engage more frequently in high risk behaviors (substance use, risky sexual practice) as a coping strategy

# Patients Experience Discrimination in Health Care Settings

- According to research, the majority of healthcare professionals hold negative, stereotyped views of people who use illicit drugs

Source: McLaughlin, D. & Long, A. (1996) An extended literature review of health professionals perceptions of illicit drugs and their clients who use them. *Journal of Psychiatric and Mental Health Nursing*

- Stigma is a major factor preventing individuals from seeking and completing addiction treatment

Source: . Luoma, J.B., Twohig, M.P., et al (2007) An investigation of stigma in individuals receiving treatment for substance abuse. *Addictive Behaviors*, 32(7), 1331-1346.

- People who inject drugs (PWID), have a lower probability of retention in HIV care, ART use, and viral suppression compared to people who do not inject drugs.

Source: Drug Policy Alliance

# Is There Stigma and Bias Here?

- Measure it: The Health Policy Projects RTI developed a survey “Measuring HIV Stigma and Discrimination Among Health Facility Staff: Comprehensive Questionnaire” to measure Stigma and Bias in Healthcare settings meaning the whole organization at different levels

Clinicians, Nurses, Medical Assistants, People in Billing Offices, Registration

- Survey Patients: Use the information gathered to develop quality indicators on Stigma and Discrimination
- Use an Intersectional Lens: Use the information gathered to assess if there are multiple layers of Stigma, Bias and Discrimination impacting patients

# How to Focus Your Response Efforts

- Use the results from the survey and consumer feedback

Each practice site is expected to develop an action plan that focuses on stigma reduction programming and submit it with their survey results.

- Important aspects of stigma reduction programming include incorporating feedback from People Who Use Drugs
- Create partnerships between People Who Use Drugs and Healthcare workers addressing key drivers of both SUD-related and key population related stigma

# Stigma Reduction Interventions Focus on Different Levels of the Healthcare Site

- Individual Level:

From the results of the healthcare worker survey, identify a specific area/belief that could lead to stigmatizing actions, and create a plan to raise awareness (e.g. hold meetings with staff and members of the stigmatized populations).

- Environmental Level:

Based on the consumer feedback, identify an area that is identified by patients that makes them feel stigmatized, and create a plan to address this area and remove the barrier to care (e.g. a separate waiting area for people who are receiving SUD-services).

# Stigma Reduction Interventions Focus on Different Levels of the Healthcare Site

- Policy Level:

Identify areas from the consumer feedback that resulted in stigmatizing behaviors (e.g. healthcare workers were overheard speaking badly about People with SUD/OD), and develop policies that will discourage this type of behavior.

Identify certain populations that did not receive adequate care, and conduct staff trainings about this population (e.g. people of transgender/gender non-conforming experience with SUD/OD) to design strategies to improve the quality of care they receive.

# Ensuring Health Equity

- Prioritize expansion of the collection and reporting of data on disparities
- Ensure that care improvement efforts specifically address health disparities
- Promote cultural humility in your workforce including the use of peers and community health workers.

Source: [communitycatalyst.org](http://communitycatalyst.org)



# Questions?

- Sources Not Already Cited:

[drugpolicy.org](http://drugpolicy.org)

[healthpolicyproject.com](http://healthpolicyproject.com)

WASSP Defining Harm Reduction For Injection Drug Users Mileen Gilkey and Malika Lamont, 2015

Measuring and Addressing Stigma in Healthcare Settings,  
[cdn.hivguidelines.org](http://cdn.hivguidelines.org)