Indian Health Service

The Importance of Patient-Centered and Strength-Based Language to Support the Patient-Centered Medical Home Model

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Disclosures

No financial disclosures.

•We do not claim to be experts on this topic; our intent is to raise awareness and create a more positive and empowering environment.



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Objectives

Define health literacy and inclusive communication.

- Discuss how health literacy and inclusive communication contribute to health equity.
- Provide examples of dehumanizing language and how to rephrase these statements to be patient-centered and strength-based.

Health Literacy

Personal

 The degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others

Organizational

 The degree to which organizations equitably ENABLE individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others

Not JUST about understanding



Inclusive Communication

- •CDC's Health Equity Guiding Principles for Inclusive Communication
 - Emphasizes the importance of addressing all people inclusively and respectfully

Key Principles

- Avoid use of adjectives such as vulnerable, marginalized, and high-risk
- Use person-first or patient-centered language
- Remember that there are many types of subpopulations
- Avoid saying target, tackle, combat, or other terms with violent connotation when referring to people, groups, or communities
- Avoid unintentional blaming



Tying it together

Inclusive Communication

Health Literacy

Health Equity





Evaluation Question

Health equity is important to healthcare professionals because it:

- A. Builds respectful, compassionate relationships with the patient.
- B. Only ensures patients understand medical information.
- C. Addresses all people inclusively, accurately, and respectfully.
- D. A and C



Chat in or give us a thumbs/hand raise if you have heard of Patient-Centered language?

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Patient-Centered Language

- A respectful and empowering way to communicate with and about individuals in a healthcare facility
- Focuses on the whole person not just their medical conditions
- Puts the patient first

PCMH Pillars



Terminology Commonly Used (in red) Suggested Language (in green)

"Addict/Drug User" Person with a substance use disorder

Person with autism "Autistic"

Person experiencing homelessness "Homeless" Low income or limited resources "Poor"

"Handicapped"
Uses a wheelchair,
Living with a disability,
Hearing impaired

"Inmate, Prisoner" Person experiencing incarceration

"Obese" Patient with obesity, extra weight, unhealthy weight "Diabetic" Person with diabetes

"Geriatric" Older Adult/Elder

"Dirty/Clean" Expected/Not expected

"Mentally III"
Person with a mental
health condition

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Strength-Based Language

- •Focuses on a person's abilities, talents, and resources, rather than their challenges.
- •Can foster positive self-esteem, motivation, and resilience, promoting more effective personal development and progress.

IHS Mission

to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level

Strength-Based Language

- Using words that focus on people's strengths rather than their weaknesses
 - Positive
 - Appropriate
 - Professional
 - Neutral
 - Non-judgemental
- "What's STRONG vs what's wrong"



Strength-Based Language

Noncompliant, Able to, Chooses to, Does not agree to Refuses Failed, Barriers, Needs, Opportunity for growth Weakness Good/Bad, Appropriate, Positive/Negative, Not controlled Above/Target or Goal Insists, Denies Reports, Says, Shares



Evaluation Exercise

Putting what we learned into practice

M.S is a 78 year old obese Veteran confined to a wheelchair who presents to the clinic today with a 2 day history of back pain. He has a history of abusing drugs although he claims he is sober but his last UDS was dirty. He is also addicted to tobacco and refuses any vaccines.

What could be changed to be more patient-centered and strength-based?

Say or chat in your answers.



Result

M.S is a 78 year old male who served in the Korean War that presents to the clinic today with a 2 day history of back pain. He uses a wheelchair. Past medical history includes obesity, a substance use disorder in recovery and a tobacco use disorder. He shares his last UDS results were not as expected due to a pre-procedural prescription for alprazolam from an outside provider for an MRI. He chooses to not receive any vaccines.



What's next?

- Consider your own language.
- •Educate your colleagues and students.
- Review education materials/handouts and note templates.
 - Medication Adherence Issues → deleted Issues. Instead of "patient misses medications 3 days per week, changed to patient is taking medications 4 days per week"
 - Using "Chooses to" instead of refuses
- Other ideas?



Evaluation Question

Why is patient-centered and strength based language important?

- A. Enhances trust and rapport
- B. Improves provider-patient communication
- C. Positive impact on relationships
- D. Improves outcomes
- E. Supports the PCMH Pillars & IHS Mission
- F. All of the above





The only impossible journey is the one you never begin.

- Tony Robbins

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