MEDICAL GASLIGHTING

Upon first glance, the following might seem like innocuous language. However, each term serves as a point of reference for how medical bias, discrimination, and prejudice shapes the ways in which people with disabilities are spoken to, as well as the critical conditions they are expected to endure. The phrases are listed in three "P" categories, as they impact **people with disabilities/patients**, manifest within **policies and practices**, and are exacerbated by **public perception**, particularly in the context of the **pandemic** and **public health**.

PEOPLE WITH DISABILITIES; PATIENTS

- Portraying an individual as an "unreliable reporter"
- "Lazy lungs"/inadvertently blaming the individual
- "Defective" or "impaired"
- "Women's troubles" or other reductive statements
- "Dramatic" or "irrational"
- "Pushy" or entitled
- "Overly anxious" or paranoid
- "All in your head"/disregarding concerns
- Admonishing people to "Get over it; it's time to move on."

POLICIES AND PRACTICES

- Rigid reliance (solely or primarily) upon "evidence-based" metrics
- Low expectations; stereotypying; generalizations
- Leveraging care due to lack of (patient-provided) "proof"
- "Scarcity" (perceived healthcare limitations)
- "Sacrifice" (certain groups = acceptable losses)
- Diagnostic delays, which results in deferred treatment
- Deservedness (evaluating who is perceived as "worthy" of care and comfort)

PUBLIC PERCEPTION

- *Entitlement* in the form of the public sentiment that people "deserve" a return to normal (even if it means endangering those with disabilities)
- *"The pandemic (or other health crisis) is over!"* Dismissive and incorrect signaling of an "expiration date"/end to ongoing public health emergencies

THE RESULT

When healthcare professionals use these inherently discriminatory terms and phrases, people with disabilities are forced to negotiate for their needs—consistently arguing and advocating for equitable treatment. This results in time, emotion, and resources being spent having to weigh which needs to prioritize and which battles to fight.

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