

From Awareness to Action: Addressing Microaggressions in Nursing Through the HEALS Framework

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Microaggressions—subtle verbal, behavioral, or environmental slights directed toward individuals based on identity—remain pervasive in healthcare settings (Cottingham, 2025). Though often unintentional, their cumulative effect has been described as a “death by a thousand cuts,” contributing to psychological distress and diminished well-being. In nursing, these interactions extend beyond individual harm and play a significant role in healthcare disparities, with outcomes ranging from dissatisfaction to death (Ijiomah & Lerew, 2024). In practice, microaggressions may present as stigmatizing language toward patients, assumptions about colleagues’ competence, or dismissive communication that undermines professional roles (Cottingham, 2025; MacIntosh et al., 2022).

Evidence demonstrates that microaggressions are associated with anxiety, depression, burnout, and impaired concentration among healthcare professionals (MacIntosh et al., 2022). Repeated exposure can create a sense of inadequacy and lack of belonging, negatively impacting engagement, productivity, and retention. In high-acuity environments, these dynamics may influence communication, clinical decision-making, and patient trust. When left unaddressed, microaggressions contribute not only to staff distress but also to inequitable patient experiences and outcomes. Despite growing awareness of implicit bias and diversity initiatives, many nurses lack structured tools to respond to microaggressions in real time. A key barrier lies in the distinction between intent and

impact. While most microaggressions are not rooted in malicious intent, their impact remains significant and measurable (MacIntosh et al., 2022). Without practical frameworks, these interactions are often minimized or ignored, perpetuating harm and reinforcing silence within healthcare teams.

The HEALS framework, developed within nursing education, provides a structured approach to addressing microaggressions in the moment. HEALS emphasizes five actionable steps: Halt by calling a pause in the interaction, Engage by leaning into the conversation, Allow space for individuals to express thoughts and perspectives, Learn through active listening, and Synthesize by integrating insights and identifying next steps (Ijiomah & Lerew, 2024). This approach aligns with Equity in the Moment (EIM) principles, which focus on acknowledging inequities, fostering dialogue, and promoting actionable change in real time (Ijiomah & Lerew, 2024). HEALS can be integrated into onboarding, simulation-based training, and unit-level debriefings with leadership support to reinforce consistent use in practice (Ijiomah & Lerew, 2024).

In practice, HEALS can be applied across clinical settings to interrupt harmful language, address bias, and promote psychological safety. For example, when stigmatizing language is used to describe a patient or colleague, a nurse can initiate a HEALS moment to pause the interaction, explore its impact, and redirect communication toward respectful, patient-centered care. Importantly, HEALS shifts the focus from blame to un-

derstanding, creating opportunities for growth while preserving team cohesion. Implementation of HEALS within healthcare organizations has been associated with increased recognition of microaggressions, greater willingness to engage in difficult conversations, and improved confidence in intervening when bias occurs (Ijiomah & Lerew, 2024). Evaluation of its impact may include measures of psychological safety, staff engagement, and willingness to intervene in bias-related situations. While early findings are promising, further research using longitudinal and peer-reviewed methods is needed to evaluate sustained outcomes.

Microaggressions are not minor. Their cumulative impact demands more than awareness alone. By equipping nurses with structured, evidence-informed tools such as HEALS, the profession can move toward a more inclusive, responsive, and equitable healthcare environment. ■

References

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