Communication Matters

Enhanced Communication & Social Determinants of Health

Dear friends,

In healthcare, as in much of society, our interconnections are vast and growing. The "Internet of everything" holds promise of bringing together people and machines, processes and inputs, to create new opportunities, new value, new ways of interacting.

While this vision for dramatic gains in human development is appealing, we are at the same time faced with seemingly-intractable challenges to health and well-being. In many of the wealthiest and most developed countries, there are people who suffer "diseases of despair" (addiction, drug overdose, depression, suicide) and chronic challenges that impair their health and that of their children. Poverty, food insecurity, incomplete education, unemployment and under-employment...the list is long and discouraging.

> "Pull a thread here and you'll find it's attached to the rest of the world."
>
> - Nadeem Aslam, *The Wasted Vigil*

Healthcare can play an important role in the lives of vulnerable populations, yet that role is starkly limited by social and behavioral factors. When we start to tug on the threads of chronic ill health, we find unaddressed traumas, social disruption and a host of factors that breed despair.

Empathic communication in healthcare is a vital element for shedding light on the dark tangle of social and behavioral challenges. We welcome you to this examination of the points of connection between social determinants of health and strategies for addressing social and behavioral issues.

The Institute for Healthcare Communication is proud to offer communication skills development courses for members of the healthcare workforce that invite connection and engagement. Our hope and expectation is that wide dissemination of empathy conveyance skills--and the values that those skills embody--will help to turn the tide toward healing among people who will most benefit.

We honor and thank you for your work in this large and lively field!

Barbara Andrews, MPPM, MPH
Director of Grants & Projects, Editor

SOCIAL & BEHAVIORAL ISSUES ARE HUGE

Social and behavioral factors are increasingly recognized as underlying drivers of health for individuals who most need care--and who consume disproportionate shares of healthcare resources (Office of Disease Prevention and Health Promotion). In Canada, social determinants are recognized as critical factors in persistent health and social inequities (Mikkonen, 2010). Social factors are notoriously difficult to define, conceptualize and address. The World Health Organization's head of the Centre for Urban Health, Agis D. Tsouros, has noted,

> *"The field of the social determinants of health is perhaps the most complex and challenging of all. It is concerned with key aspects of people's living and working circumstances and with their lifestyles. It is concerned with the health implications of economic and social policies, as well as with the benefits that investing in health policies can bring."* (World Health Organization, International Centre for Health and Society, 2003).
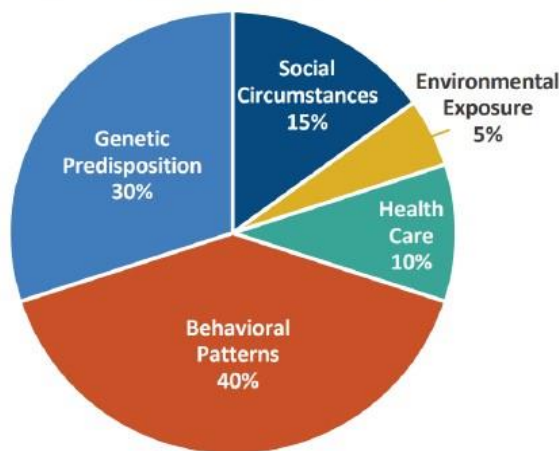
Source: Kaiser Family Foundation, Nov. 2015, Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity

The case for the powerful impact of social determinants on health outcomes is ironclad: **healthcare accounts for only 10 percent of the impact on premature deaths; by contrast, social circumstances and behavioral patterns account for 55 percent** (Henry J. Kaiser Family Foundation, 2015). Genetics play a contributing role (30 percent) and environmental exposures are also relevant (5 percent).

Moreover, **half of all healthcare costs in the U.S. are attributable to 5% of the population**: individuals with high rates of "sentinel syndromes" (addiction, mental health conditions, chronic pain, and cognitive disorders) (Waller, 2018). These syndromes are persistent, complex and **overwhelmingly associated with histories of trauma**; they are rarely if ever ameliorated by limited disease-specific treatments.

ADDRESSING ROOT CAUSES

There is growing recognition that until and unless the root causes of health challenges are addressed, there will not be significant improvement in the overall health status of vulnerable populations. This has implications for patients and their families and for the healthcare system as a whole.

HIGH RATES OF TRAUMA

A vast array of recent research findings support the notion that **individuals in vulnerable populations have high rates of trauma in their lives.** There is a growing movement to make organizations and the services they provide more "trauma-informed." A national initiative organized by the Center for Health Care Strategies and supported by the Robert Wood Johnson Foundation, Advancing Trauma-Informed Care, has distilled a list of **10 Key Ingredients for Trauma-Informed Care** (Center for Health Care Strategies, Inc., 2017). **Many of these key ingredients center on communication**.

IHC's communication skills development programs generally, and its newest curriculum in particular, The Empathy Effect: Countering Bias to Improve Health Outcomes, provide **practical strategies to support all members of healthcare teams** to create a more welcoming and healing environment. Empathic communication skills promote patient engagement and help to protect healthcare team members from secondary stress.

Organizational practices	**Clinical practices**
reorient the culture of a health care setting to address the potential for trauma in patients and staff:	*address the impact of trauma on individual patients:*

1	Lead & communicate about being trauma-informed	7	**Involve patients in the treatment process**
2	Engage patients in organizational planning	8	**Screen for trauma**
3	**Train both clinical and non-clinical staff**	9	Train staff in trauma-specific treatments
4	Create a safe physical and emotional environment	10	Engage referral sources and partner organizations
5	**Prevent secondary traumatic stress** in staff		
6	**Build a trauma-informed workforce**		

Source: 10 Key Ingredients for Trauma-Informed Care, Center for Health Care Strategies, Inc.

THE CASE FOR EMPATHIC COMMUNICATION WITH VULNERABLE POPULATIONS

Empathic communication is essential to **(1) build trusting relationships** so vulnerable individuals come to care and stay in care, **(2) enable effective and sensitive screening** for specific social determinants that compromise individual patients' health and well-being, and **(3) ensure healthcare interactions are consistently free of bias** and judgment so that patients and caregivers can work together to address patients' issues.

BAD THINGS HAPPEN WHEN TRUST IS ABSENT

While strong communication skills are essential to forming relationships and building trust, they are especially vital to understanding and addressing social determinants of health that affect the most vulnerable populations that healthcare organizations serve. There are a number of ways that poor communication can thwart even the best organized and most well-meaning efforts:

- Expressions of judgment are commonly perceived by patients as disrespect (Hill, 2010)
- Perceived disrespect causes the recipient to experience fear, anger, shame, confusion, uncertainty, isolation, self-doubt, depression, and a whole host of physical ailments, such as insomnia, fatigue, nausea, and hypertension (Leape LL, 2012)
- Patients who feel disrespected do not trust the individuals or organizations charged with their care
- **Without trust, patients are less likely to disclose information**, especially if it involves things that they fear may trigger further judgment
- Patients who lack a trusting relationship with a provider may **delay care** or avoid it altogether, with potentially serious health impacts (The Commonwealth Fund, n.d.)
- Vulnerable patients who seek care late and reluctantly are also feeling ill, frightened and concerned; their health difficulties and mistrust are compounded by emotional distress, which may manifest as behaviors that elicit further judgment
- Limited health literacy is widespread among vulnerable populations, highlighting the need for added attention to clear communication (National Network of Libraries of Medicine)

DISRESPECT & HIERARCHIES

Disrespectful behaviors arise from individual personalities, external stresses and individual responses to stress. They may be attributable to inter-professional and hierarchical power dynamics, and they persist in organizations that tolerate them (Grissinger, 2017). Further, even today, in too many healthcare organizations, the patient is at the bottom of the hierarchy, and the patient who is impoverished or otherwise vulnerable is at the very lowest rung of the status hierarchy.

PUTTING PATIENTS FIRST

As provider organizations and individuals seek to address social determinants of health, there are some specific things they can do to put patients first:

- **Define, articulate and commit to high standards** for treating everyone with respect. Model and reward respectful behaviors; do not tolerate egregious excursions from the standard. Hire and review against the standard. Check for consistency with the standard, and make adjustments as indicated.
- **Offer employees at all levels opportunities to enhance their skills** and "stretch." Reinforce communication skills development programs over time.
- **Adopt "health literacy universal precautions"** to ensure that all patients understand all the important aspects of their care (Agency for Healthcare Research and Quality, 2018).
- **Ensure capacity for accessible interpreter services** as needed. Model and encourage **cultural competency**.
- **Quickly and thoroughly investigate and address all apparent breaches of trust.** Remember: Trust is an ineffable, fragile and essential element for all human interactions, and once broken, it is hard to regain.
- **By all means, screen for social determinants of health, and do so sensitively**. Ensure that all members of the healthcare workforce are aware that many of the social determinants of health are fraught with feelings of shame or fear on the part of patients (consider: food insecurity, substance use disorders, intimate partner violence, sexually transmitted disease, depression, obesity, alcohol and tobacco use, etc.).

GNARLY ISSUES

There are no magic pills to prevent disrespectful behaviors or to compel organizations to insist they be banished. We are encouraged by the growth of value-based health service reimbursement, patient satisfaction scores, trauma-informed care and cultural shifts toward appreciation of trusting relationships. These and similar trends inspire hope, and **IHC's communication skills training programs provide specific skills** that can help organizations and individuals shift the way they interact with members of vulnerable populations.

We acknowledge that consistently effective and empathic communication alone cannot solve all the problems of national under-investment in social services or uneven availability of services or obstacles to accessing care. It can, however, secure the foundation for ongoing care and make the best of the system in which we now operate.

THE EMPATHY EFFECT

IHC's newest curriculum offers an intensive, evidence-based experiential learning opportunity **for all members of the healthcare team**. Learners are exposed to the rich literature supporting trauma-informed care and empathic communication. Most significantly, they **practice empathy conveyance skills**, with balanced feedback from expert facilitators and peers.

> *"Great workshop. I really learned a lot of skills that I can use in my day-to-day work."*
> -- 2018 Empathy Effect learner
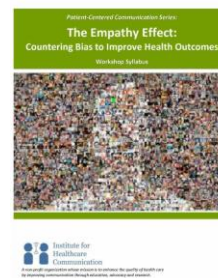
The Empathy Effect curriculum is available as a half-day workshop, full-day Workshop-PLUS program (upcoming: Sept. 28, 2018, Toronto, Ontario), and 3.75-day train-the-trainer faculty course.

For further information about bringing The Empathy Effect to your organization, please contact Katheryne Stewart, email: kstewart@healthcarecomm.org, or call toll-free at (844) 825-4226.

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