

Empathetic and Culturally Competent Communication



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The Medical SLP Collective
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Time-Ordered Agenda

- ▶ 8:30 PM - 8:35 PM: Introduction
- ▶ 8:35 PM - 8:40 PM: Goals, Objectives
- ▶ 8:40 PM – 9:00 PM: Identify the Benefits of listening with empathy
- ▶ 9:00 PM – 9:20 PM: The five steps to listening with empathy; how to use each one to engage in culturally competent communication and build trust.
- ▶ 9:20 PM – 9:30 PM: Practical examples
- ▶ 9:30 PM – 9:45 PM: Q&A

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Disclosure Statements

Financial:

- ▶ Maria Morgan is a consultant for Equity in Motion. She will receive a speaking fee for this course from the Medical SLP Collective.

Nonfinancial:

- ▶ Maria Morgan has no non-financial disclosures.

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Learner Objectives

- After watching this presentation, the participant will be able to:
 1. Learners will identify the benefits of listening with empathy.
 2. Attendees will list the five steps of listening with empathy to engage in culturally competent communication and trust building.
 3. Learners will identify examples of listening with empathy.

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A Little About Me

- ▶ Maria Morgan has spent most of her career reviewing, developing, and implementing programming and policy focused on equity and inclusion through her work in health care and education. She previously practiced law in Kansas City, where she focused on matters involving employment discrimination, harassment, and civil rights issues while serving as a labor and employment and education lawyer in law firms and corporations. Her employers leveraged her experience as a plaintiff's attorney, defense attorney, and her work in civil rights compliance. She has significant experience training organizational leadership teams on equity and inclusion as well as employment issues. Maria worked as Staff Counsel for Health Midwest where she was responsible for all aspects of employment law for the 13-hospital system. While at Health Midwest, Maria led a team charged with developing a cultural competency program to improve health equity outcomes for marginalized patient populations. Maria holds a Juris Doctorate degree from the University of Missouri – Kansas City and an undergraduate degree from the University of Missouri – Columbia.



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Sources and Images

- To ensure that this presentation is up-to-date, information was collected from the the sources cited in March 2022.

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“With empathy, we don’t direct,
we follow. Don’t just do
something,
be there.”

Marshall Rosenberg, PhD
Founder of the Center for Nonviolent Communication

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What is clinical empathy?



The connecting of feelings and meanings that are associated with a patient's experience while simultaneously identifying, isolating, and withholding one's own reactions.

- Assures the patient that you care
- Creates an alliance between provider and patient
- Focuses on communication from a patient centered perspective

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Why clinical empathy is so important in healthcare

- Empathy is necessary for a healthcare provider to connect with patients and, at times, can be more effective with in-patient care than technical ability. In fact, one of the strongest arguments for empathy in the healthcare setting is the strong correlation between having a good patient-provider relationship and a positive treatment outcome.
- According to a recent study, “the beneficial effects of a good patient-clinician relationship on healthcare outcomes are of similar magnitude to many well-established medical treatments.”

(Welby, 2020)

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Examples of clinical empathy?



“It sounds like you feel terrible...”



“Being ill is so frustrating, why don’t you tell me more about what you’ve endured?”



“Unfortunately — won’t work here because...”



“I have some ideas that could be helpful and may reduce your ____.”

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What are the benefits of connecting with empathy?

- IMPROVES THE PHYSICIAN - PATIENT RELATIONSHIP. When a patient feels caring, and competence is high - connection and trust is created.
- CAN LEAD TO GREATER PROFESSIONAL SATISFACTION. When a patient feels caring, and competence is low – distrust is created.
- INCREASED COLLABORATION AMONG CO-WORKERS. When caring is low, and competence is high – respect can be created.

(Welby, 2020)

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Eight steps to listening with empathy in your clinical practice

- Decide to connect with empathy
- Use subtle cues to convey that you are listening intently and honor the first "golden moments" – Start the appointment by making eye contact
- Listen for underlying feelings
- Listen for underlying needs or values- Let your patient know you are listening – Be aware of your body language

(American Medical Association, 2015)

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Eight steps to listening with empathy in your clinical practice

- Remain present when you are listening to the speaker- Be sure your patient knows you are listening – Record details that humanize your patient
- Consider responding verbally – Be curious about your patient – Show support to your patient
- Look for cues that the speaker has finished expressing him/herself – Look for deeper ways to empathize with your patient
- Reflect on your experience and rejuvenate yourself for the next time you offer empathy

(American Medical Association , 2015)

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Improve Provider Empathy in 7 Simple Steps

- Personal details are key.
- Spend an extra minute.
- Make eye contact.
- Show your support.
- Put yourself in your patients' shoes.
- Get patient feedback on how you're doing.
- Share this article with your staff.

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Hypothetical

- Suppose you pulled a muscle in your back while doing housework, and you've been in severe pain for the past three days. You need a hand to help sit or stand, and sleeping is almost impossible because you can't find a position that doesn't cause your back to ache. You're in tears when you finally call the doctor's office to make an appointment.
- A nurse calls your name and checks your weight and height. He confirms your health history on the computer and takes your vitals. A nurse practitioner enters the room, asks about your activity level, hands you a prescription for pain medication, and walks out.
- Although the nursing team did everything right, you would probably leave the doctor's office feeling unsure: No one acknowledged your distress due to the pain. No one seemed to understand. No one showed you empathy.

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Challenge your own prejudices and stereotypes

There will always be people in our lives who we're not comfortable around. Whether it's a coworker who you think doesn't like you, or a friend's friend who always makes you feel awkward and underdressed, discomfort is inevitable. But it often stems from our own prejudice and assumptions.

Put yourself in the other person's position. Since no one's life is perfect, what might their struggles be? What do they want? Find out this information by trying to get to know this person. Finding common ground is a great place to start.

(Welby, 2020)

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Identifying Underlying Needs

- Check your intention: Why do you want to do this right now? (Intention)
- Focus on the present moment: What is presenting right now.
 - What information are you perceiving through your five senses? (Observation)
 - What physical sensations and emotions are you noticing? (Feeling)
 - What universal need/value is important to you right now? (Need)
 - What could you ask for that may contribute to your well-being? (Request)

(Rosenberg et al., 2005)

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Identifying Underlying Needs

Our communication is based on underlying needs that we as humans are seeking to fulfill.

Transcendence	Presence, Inspiration, Evolution, Beauty, Harmony
Well-being	Healing, Peace of Mind, Balance, Ease, Trust
Honesty	Authenticity, Self-Connection, Self-Expression, Clarity, Learning
Autonomy	Freedom, Choice, Creativity, Empowerment
Meaning	Purpose, Contribution, Competence, Integrity
Survival	Sustenance, Nurturance, Procreation, Sensory Stimulation
Protection	Security, Safety, Justice, Respect, Consideration
Interdependence	Cooperation, Community, Inclusion, Mutuality, Support
Empathy	Understanding, Connection, Love, Acceptance, Affection
Regeneration	Celebration, Gratitude, Mourning, Leisure, Play

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Culturally Competent Patient Communication Why It is So Important

Patients bring to the healthcare encounter cultural backgrounds, beliefs, practices, and languages that require culturally competent communication to maximize the quality of care they receive. For instance, patients and providers may have different understandings of the relationships among illnesses, illness symptoms, etiology, expectations about appropriate treatment, and what is expected of them in the process.

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Culturally Competent Patient Communication Why It is So Important

Also, asking questions of healthcare providers is not an acceptable behavior in some cultures. Patients from these cultures may be less likely to ask even clarifying questions and, subsequently, may not understand their condition or be able to follow their treatment plan, potentially resulting in a lower quality of care or even medical error.

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STRATEGIES TO COMBAT IMPLICIT BIASES

- Introspection - Explore and identify your own implicit biases by taking implicit association tests or through other means.
- Mindfulness - Practice ways to reduce stress and increase mindfulness, such as meditation, yoga, or focused breathing.
- Perspective-taking - Consider experiences from the point of view of the person being stereotyped. This can involve consuming media about those experiences, such as books or videos, and directly interacting with people from that group.
- Learn to slow down - Pause and reflect on your potential biases before interacting with people of certain groups to reduce reflexive reactions. This could include thinking about positive examples of that stereotyped group, such as celebrities or personal friends.

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STRATEGIES TO COMBAT IMPLICIT BIASES

- Individuation - Evaluate people based on their personal characteristics rather than those affiliated with their group. This could include connecting over shared interests or backgrounds.
- Check your messaging - Embrace evidence-based statements that reduce implicit bias, such as welcoming and embracing multiculturalism.
- Institutionalize fairness - Promote procedural change at the organizational level that moves toward a socially accountable health care system with the goal of health equity.
- Take two - Practice cultural humility, a lifelong process of critical self-reflection to readdress the power imbalances of the clinician-patient relationship.

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Culturally Competent Patient Communication

Motivational Interviewing

- Talk Therapy is Not Universally Meaningful
- It is ethnocentric to think "western therapy dialogue" is somehow universally meaningful and effective.
- Self-Reflection Does Not Always Come Easily
- Consider that in many cultures people are not encouraged to talk about themselves to the extent that Americans generally are.
- Patient Literacy and Health Literacy
- Patient literacy/health literacy and the ability to speak English will impact how MI can be used in primary care settings.

(Carteret, 2018)

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Social Perspective Taking

Perspective Taking Theories

Simulation theory

we mentally place ourselves in the other person's shoes, attempting to simulate what the target thinks.

Implicit theory

We use our general knowledge and implicit theories about other people to infer the target's mental States.

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Skills and attributes that can be used to enhance Social Perspective Taking

- Cultivating self-awareness
- Being open, curious, and willing to take interpersonal risks
- Being able to cope with uncertainty
- Observing and listening carefully to the other person
- Cultivating empathy toward another person's thoughts and feelings, as a means to enhance perspective-taking
- Resisting snap judgments and delaying response
- Forming a perception and then checking its accuracy
- Inviting feedback and clarifying communication
- Taking action based on the entire process and the completed SPT communication loop

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Additional Relevant Skills

- Predicting what people are going to talk about or do
- Guessing at unknown words or phrases
- Using knowledge of the subject to help increase understanding
- Identifying relevant and ignoring irrelevant information
- Retaining relevant information (note-taking, summarizing)
- Recognizing discourse markers and cohesive devices
- Understanding intonation, stress, gestures, facial expressions, etc.
- Inferring, e.g., speakers' attitudes or intentions

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Four Components of Social Perspective Taking

- An Introduction to Perspective Taking;
- Exploration of the Self;
- Perspective Taking with a Similar Other; and
- Perspective Taking with a Culturally Different Other.

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Taking the Perspective of a Culturally Different Other

Ethnocentrism

To overcome one's native ethnocentrism, Hoopes (1979) argues individuals can undertake a series of steps in the following order:

- Cultivate awareness of other cultures
- Understand cultural relativism and difference
- Accept and respect those differences
- Appreciate and value those differences
- Adopt new attitudes and behaviors, including ones that support cultural assimilation
- Assimilate and acculturate

(Roan et al., 2009)

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Cross-Cultural Communication

- Take extra time in communication
- Engage in more active listening, mirroring, and "back translation" to confirm mutual understanding
- Be highly aware of nonverbal cues/channels and the meaning of silence
- Use additional confirming sources of information/interpretation where possible
- Question tactfully and in the context of culturally acceptable communicative behavior
- Engage in extra exchanges to confirm meaning and mutual understanding

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Communication Challenges

It is important to note individuals usually get feedback from others when they are *not understood*. In contrast, they rarely get unsolicited feedback when they are *misunderstood*. Thus, one must "check in" to ensure their message has been interpreted correctly. People make choices when they get into communicative trouble: they may give up or revise their communication goals or they may try new strategies to succeed in communicating. Crucial skills that aid in communication understanding include message adjustment, clarification and confirmation requests, mime and gesture, appeals for help, paraphrasing, guessing from context, reactive communication that elicits new input, laughter, nonverbal expressions of empathy, and engaged body language.

(Byram, 1997; Matsumoto & Juang, 2004).

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Cultural Communication Challenges

- When patients and providers speak the same native language, patients are more likely to report positive physical and mental health outcomes. Alternatively, patients' inability to communicate in their native language could lead to delays in care, fewer or missed appointments, nonadherence to therapy, and medical error.

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Cultural Communication Challenges

Also, asking questions of healthcare providers is not always an acceptable behavior in some cultures. Patients from these cultures may be less likely to ask even clarifying questions and, subsequently, may not understand their condition or be able to follow their treatment plan, potentially resulting in a lower quality of care or even medical error.

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Cultural Communication Challenges

- Absent adequate translation resources, patients' relatives or hospital staff may be asked to translate, numerous studies have documented problems with this approach, ranging from mistranslation to patient unwillingness to disclose important but sensitive information in the presence of a family member.

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Benefits of Culturally Competent Communication

<p>Social Benefits</p> <ul style="list-style-type: none"> Increases mutual respect and understanding between patient and organization Increases trust Promotes inclusion of all community members Increases community participation and involvement in health issues Assists patients and families in their care Promotes patient and family responsibilities for health 	<p>Health Benefits</p> <ul style="list-style-type: none"> Improves patient data collection Increases preventive care by patients Reduces care disparities in the patient population Increases cost savings from a reduction in medical errors, number of treatments and legal costs Reduces the number of missed medical visits 	<p>Business Benefits</p> <ul style="list-style-type: none"> Incorporates different perspectives, ideas and strategies into the decision-making process Decreases barriers that slow progress Moves toward meeting legal and regulatory guidelines Improves efficiency of care services Increases the market share of the organization
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(American Hospital Association, 2013)

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Self-Evaluation Approaches

- ▶ When analyzing demographic trends of patient feedback over the last 12 months, I have NOT noticed any notable differences in patient perception of care across identity groups.
- ▶ When analyzing demographic trends of patient feedback over the last 12 months, I have NOT noticed any notable differences in patient perception of care across identity groups.

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Self-Evaluation Approaches

- ▶ In the last two weeks of care provision, I have been attentive to the talk time ratios — the balance of time spent talking with vs. listening to — with patients of various backgrounds.
- ▶ Over the last 6 months, I have frequently engaged in practices aimed at increasing my cognitive control (e.g. mindfulness meditation) in an effort to mitigate the influence of implicit bias in my care provision.
- ▶ When analyzing treatment and/or care decisions I have made over the last 6 to 12 months, I have NOT noticed any prominent differences in my treatment decisions and/or care provision across identity groups.

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Questions?



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References:

- ▶ American Hospital Association. (2013). *Becoming a culturally competent health care organization*: AHA, American Hospital Association. Retrieved from <https://www.aha.org/atahref-guides/2013-06-18-becoming-culturally-competent-health-care-organization>
- ▶ Byram, M. (1997). *Figure 1. model of intercultural communicative competence*. ResearchGate. Retrieved from https://www.researchgate.net/figure/Model-of-Intercultural-Communicative-Competence-Byram-1997_fig1_319699557
- ▶ Carteret, M. (2018). *Motivational interviewing across cultures*. Dimensions of Culture. Retrieved from <https://www.dimensionsofculture.com/2018/01/phrasing-questions-for-relevancy-outside-mainstream-american-culture/>
- ▶ *Listening with empathy PowerPoint*. American Medical Association. (2015). Retrieved from <https://redhub.ama-assn.org/data/journals/steps-forward/937527/10,1001stepsforward.2017.0046supp2.pptx>
- ▶ Matsumoto, D. R., & Juang, L. (2004). *Culture and psychology*. Thomson/Wadsworth.
- ▶ Roon, L., Strong, B., Foss, P., Yager, M., Gehlbach, H., & Melcoffs, K. A. (2009). *Social Perspective taking - Harvard University. Social Perspective Taking*. Retrieved from <https://dash.harvard.edu/bitstream/handle/1/4556387/Gehlbach%202009%20Social%20Perspective%20Taking.pdf?sequence=1>
- ▶ Rosenberg, M., Max-Neef, M., Manske, J., & Manske, J. (2005). *Radical compassion- needs wheel*. Files: Hand-outs, recordings, notes, etc. Retrieved from <http://radicalcompassion.squarespace.com/files/handouts>
- ▶ Welby, M. (2022). *How to show empathy to patients - even when you're stressed*. Back to Top. Retrieved from <https://www.wolterskluwer.com/en/expert-insights/how-to-show-empathy-to-patients-even-when-youre-stressed>

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