

Implementing a Narrative Medicine Practice

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Disclosures

- We have no relevant relationships with ineligible companies to disclose.
- We do not intend to discuss any unlabeled/unapproved uses of drugs/devices in the presentation.

Objectives



ARTICULATE THE UTILITY OF
NARRATIVE MEDICINE
INTERVENTIONS.



PRACTICE A NARRATIVE
MEDICINE EXERCISE.



DESCRIBE STEPS TO START A
NARRATIVE MEDICINE
PRACTICE.

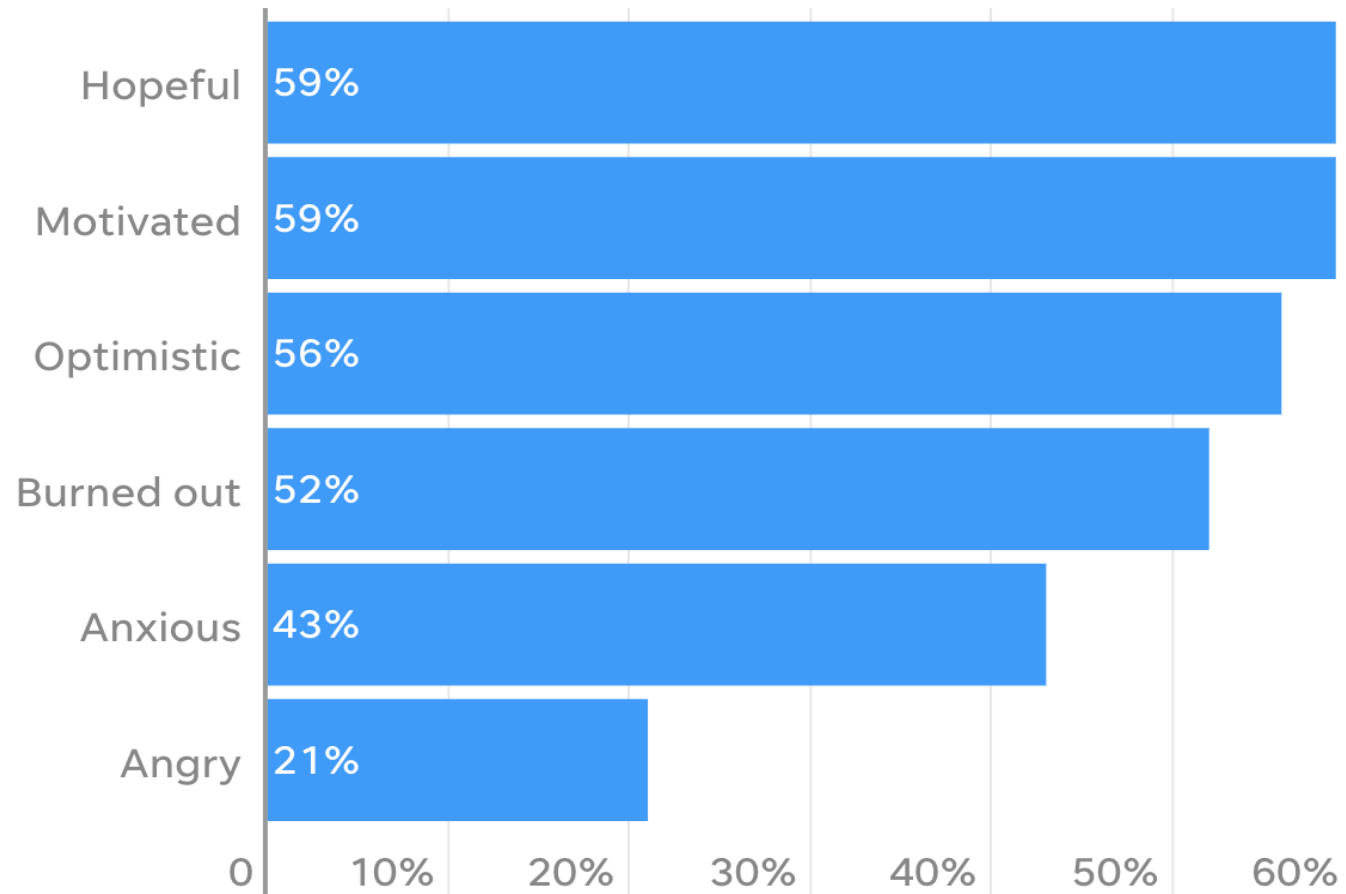
How we were doing *before*

- 2109 AAHPM members
- Maslach Burnout Inventory Scale
- Rate of burnout (EE \geq 27, DP \geq 10)

*(chaplains, pharmacists, physician assistants, psychologists, students, occupational therapists)

Profession	Rate of Burnout
Physicians	33.6%
Nurses	31.9%
Social Work	29.7%
Other*	31.0%

How health care workers feel about going to work these days:



Source: USA TODAY/Ipsos Poll of 1,170 health care workers conducted Feb. 9-16 online by the Ipsos probability-based KnowledgePanel. Margin of error +/-3.8 percentage points.

Accessed 3 April 2022 at <https://www.usatoday.com/story/news/nation/2022/02/22/covid-health-care-workers-poll-pandemic-burnout/6844789001/>.

What to do with burnout and conflicting emotions?

- Systemic forces are at work – not just you
- Therapy
- Mindfulness

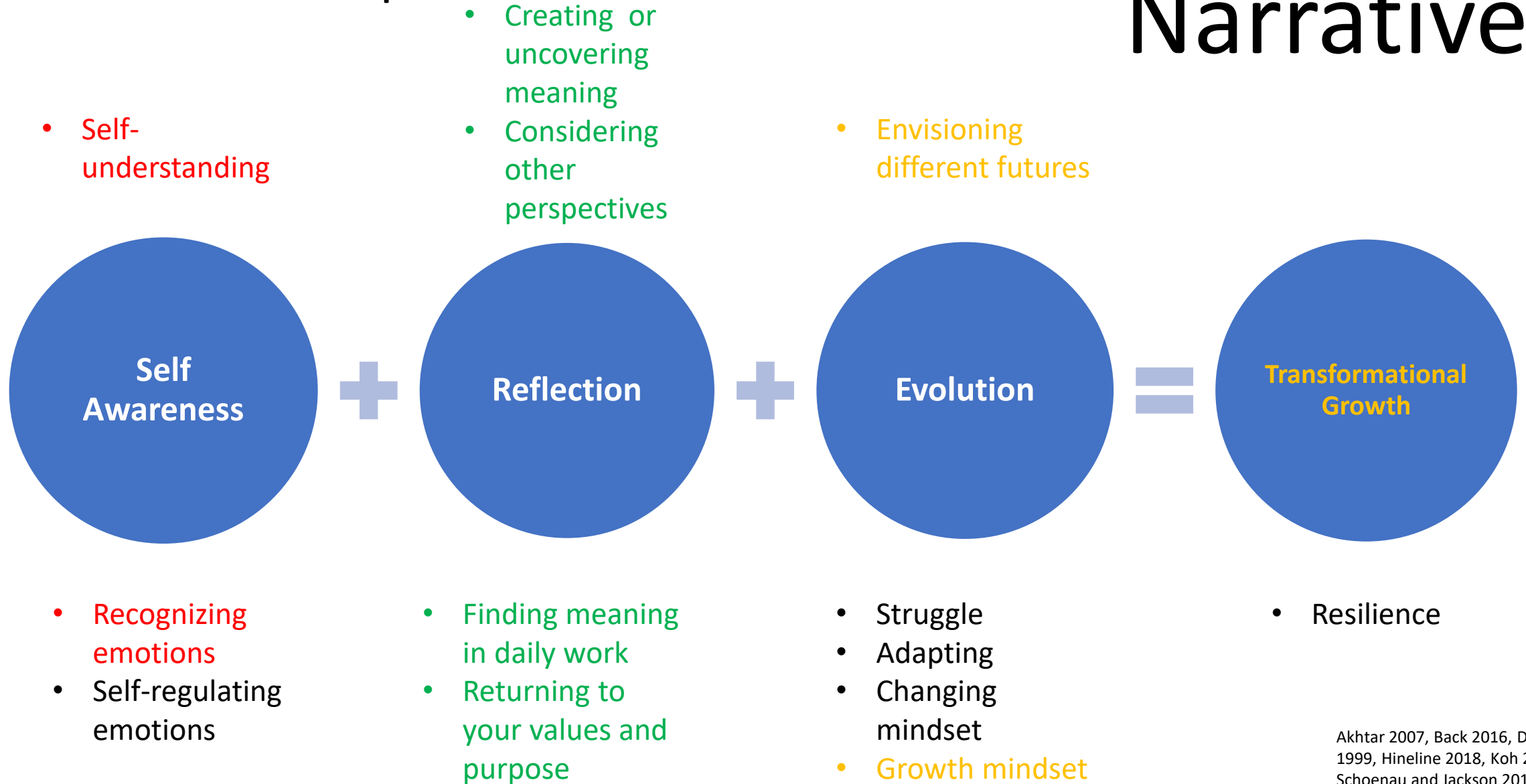
Back et al 2016

Michler Bishop 2022



What else helps?

Narrative

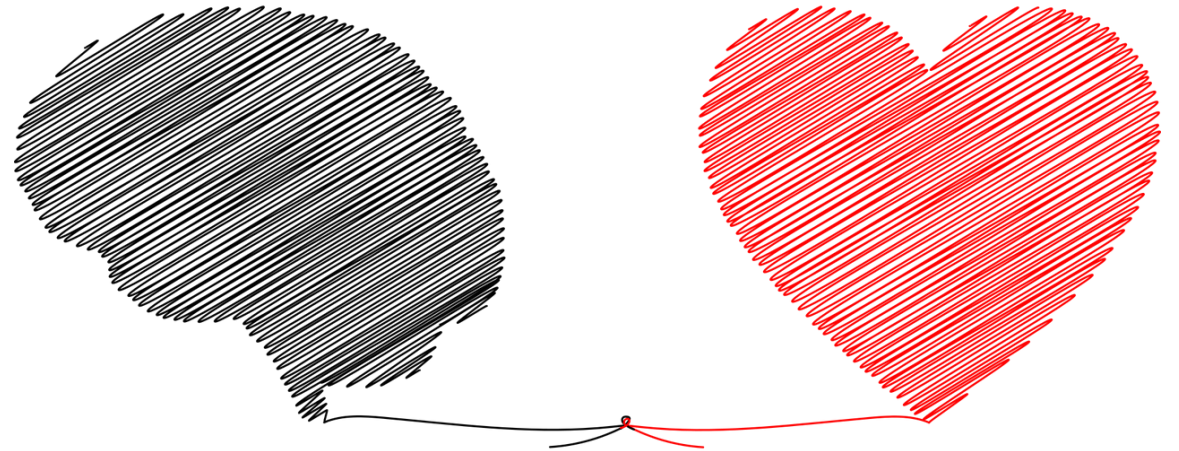




Brockington 2021, Gilliam 2020, Hensel 1992, Nutting 2021, Paton 2021

Narrative Medicine

- “the competence that human beings use to absorb, interpret, and respond to stories”
- Bridging divides that separate us from “patients, [our]selves, colleagues, and society”
- What it *isn't*: therapy



Reflection in Practice

(clinician with self)

Empathic Engagement

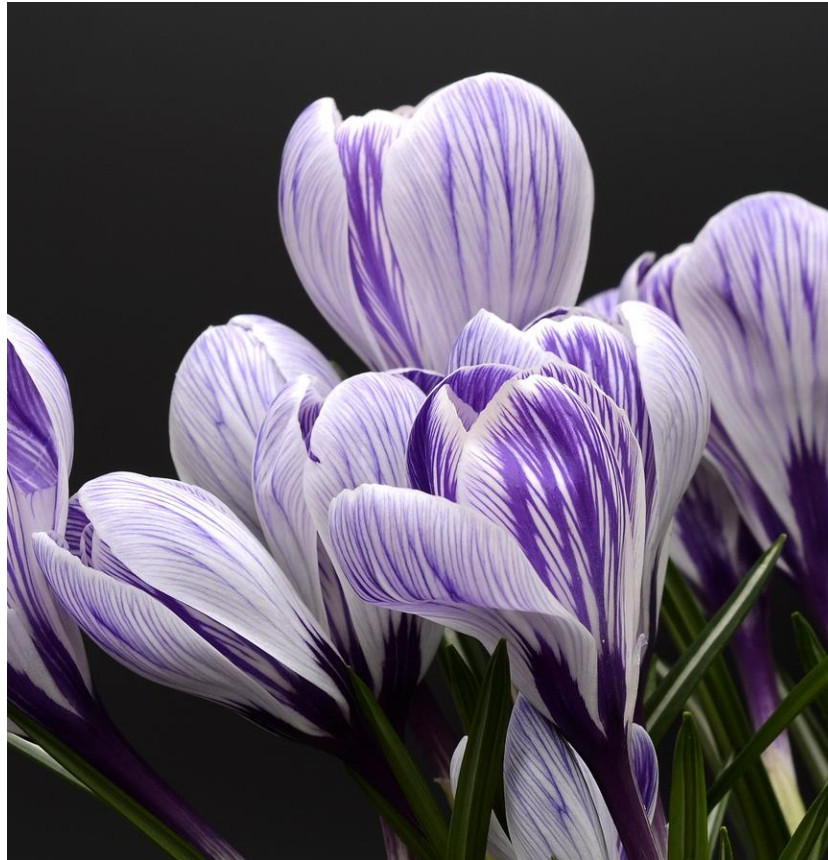
(clinician with patient)

Public Trust

(clinician with society)

- Listening to stories
- Reflecting upon stories
- Being moved to act by stories

Origins



Charon 2001, Kutac 2016

Framework



Read



Reflect



Respond

Implementation

Can Writing and Storytelling Foster Self-care?

A Qualitative Inquiry Into Facilitated Dinners

[Anne Bruce](#), PhD, RN, [Helena Daudt](#), PhD, and [Susan Breiddal](#), PhD

> [Nurs Sci Q](#). 2021 Oct;34(4):398-404. doi: 10.1177/08943184211031575.

The VA Storybook Program: Humanizing Care With Nurse Stories

[Tonya J Roberts](#)¹, [Thor Ringler](#)², [Seth Jovaag](#)³

Whose story is it?

The Atlantic

HEALTH

Should Doctors Write About Patients?

The benefits—and ethical pitfalls—of telling true stories as a physician

By Anna Reisman

Protecting Patient Privacy in Narratives: The Lifespan-Brown Checklist for Appropriate Use of Patient Narratives

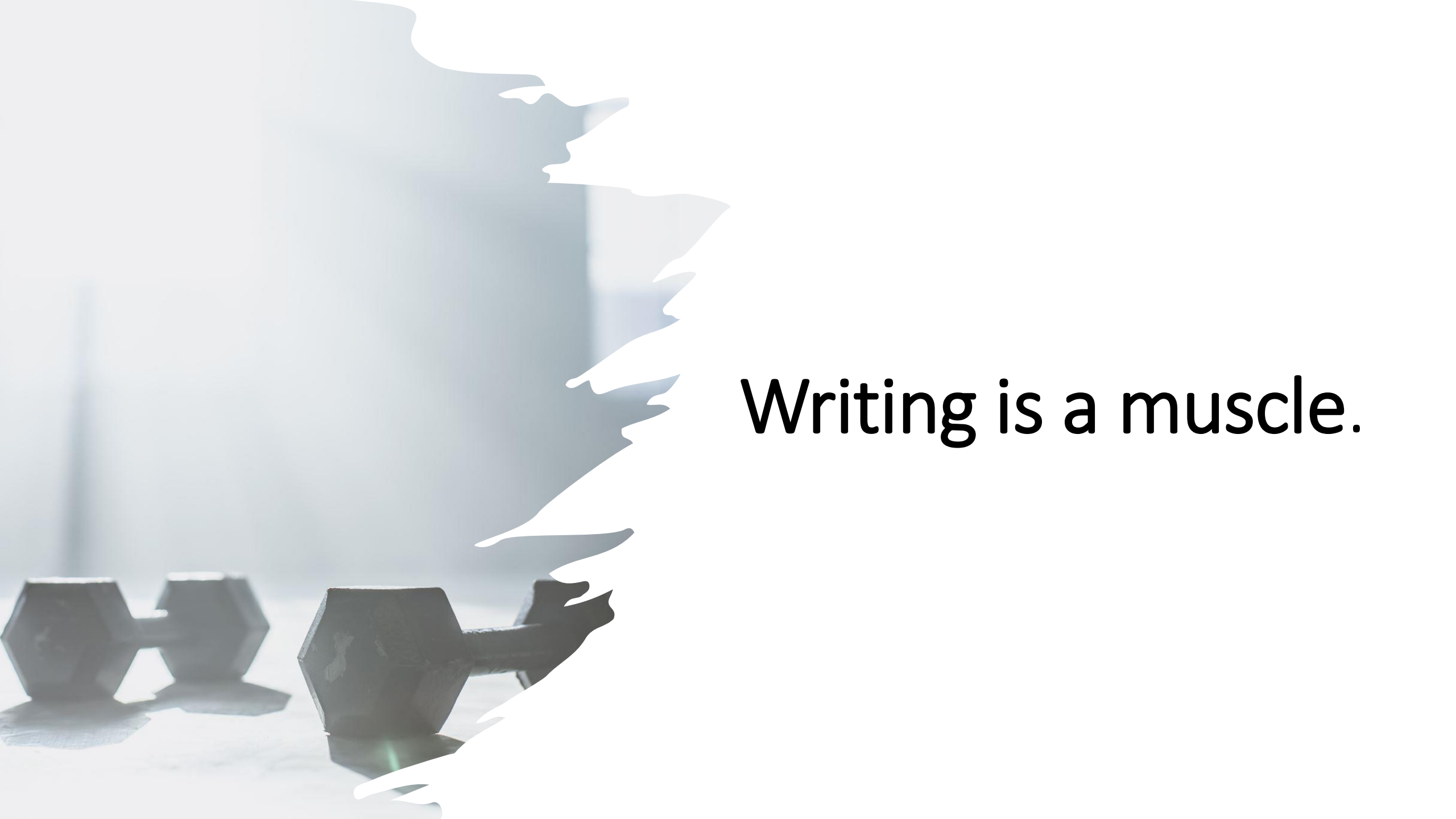
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Disclosures of potential conflicts of interest may be found at the end of this article.

The act of
writing
changes the
story.





Writing is a muscle.

*You already
know
the questions
that
make a story.*

- “I think I can take better care of you when I know you a little better; can you tell me about yourself?”
- “What are you known for?”
- “What might your (friend/neighbor/spouse) say about you?”
- “When you think about the future, what are you hoping for?”
- “When you think about the future, what are you worried about?”

The stories of your patients

“Jane Doe is a 76-year-old grandmother of five who enjoys rehabilitating antique dolls and bedazzling custom leather jackets, chaps and boots for rodeo riders. She lives alone, though that is getting difficult because of the cancer-related pain she is having that limits her mobility. Her children are around to help her, though she admits she has a hard time accepting the help.”



Parallel Charting



A few samples from the UW Palliative Care Program's 2021-2022 Writer's Group



Parallel Charting

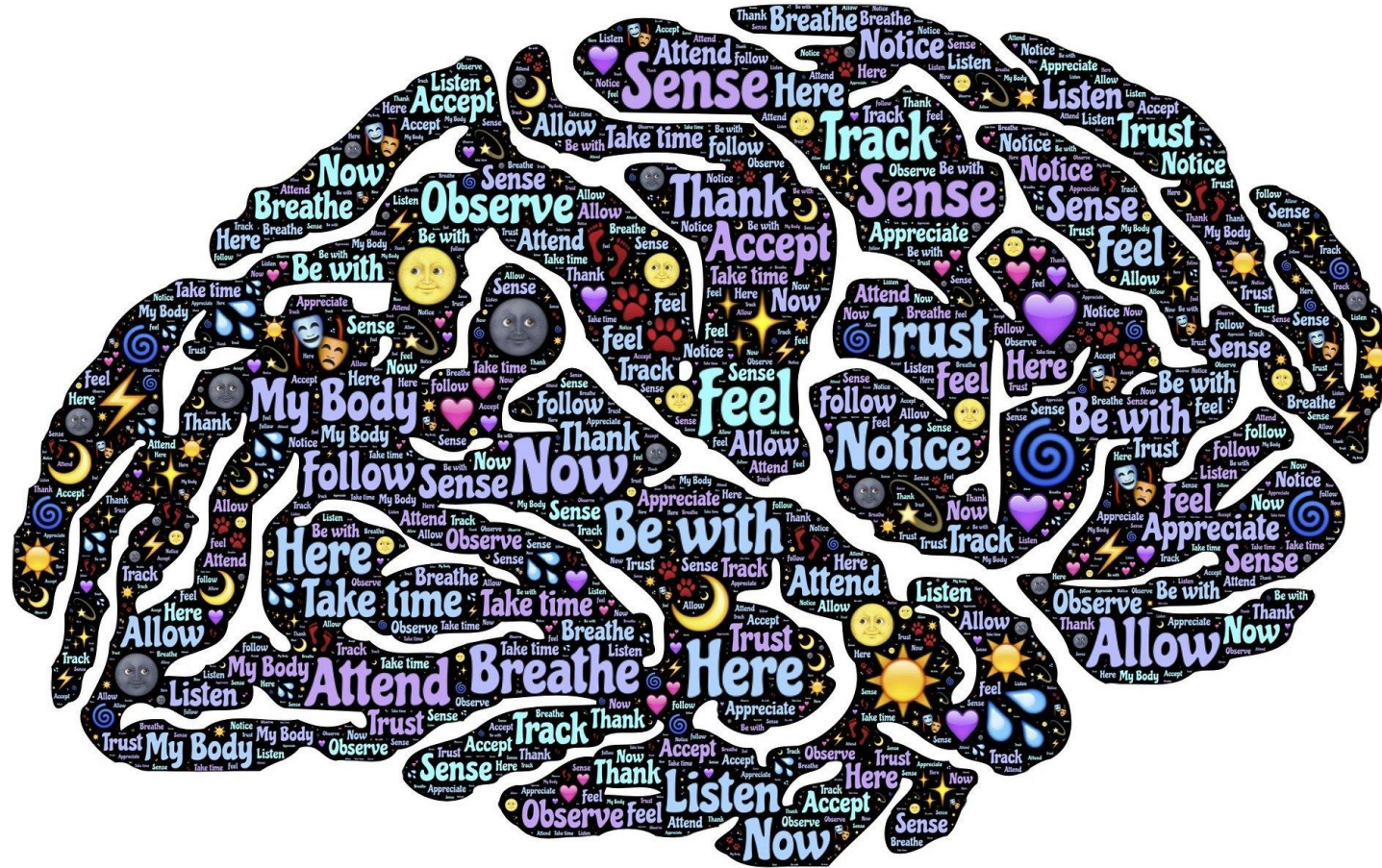
**There is no
incorrect
approach to this
exercise.**

**It can take any
form you want.**

Practice!

- 7 minutes
- **An experience you've had** working with a client or patient (***your personal experience***)
- People you **recall vividly**
- Experiences that still **emotionally engage you**
- Clarity and honesty
- What it made you **feel, question, observe, reminded you of**
- We will ask you to **share in small groups** afterward.

Let's do this thing!

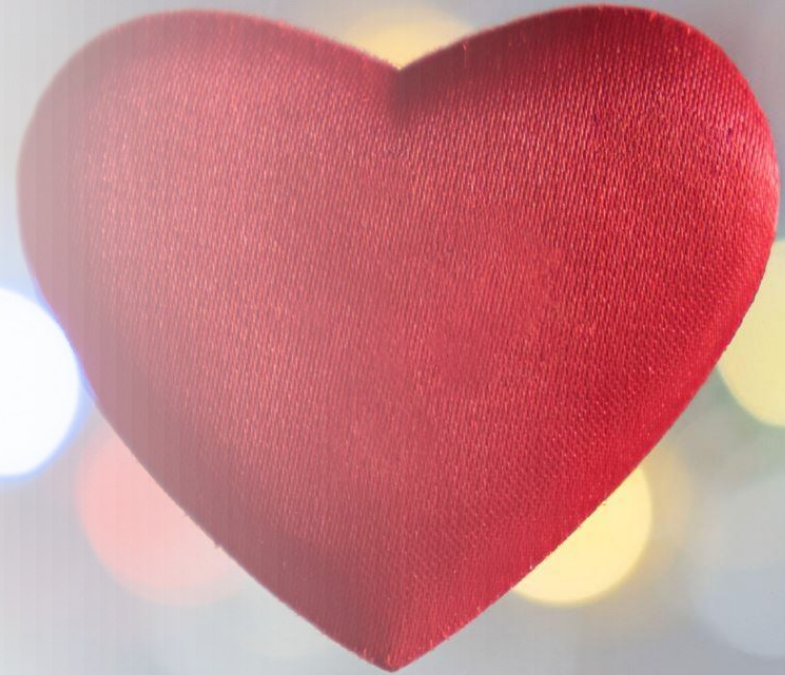




Time to share



Baring one's
soul is not for
the faint of
heart!



Implementing a personal writing practice

- Intention-setting: **Why** write?
 - Polish work to submit for **publication**
 - An **outlet and space** to deal with your work, that is solely yours
 - A method to **share** experience with a colleague
 - To **make something** for the sake of the process



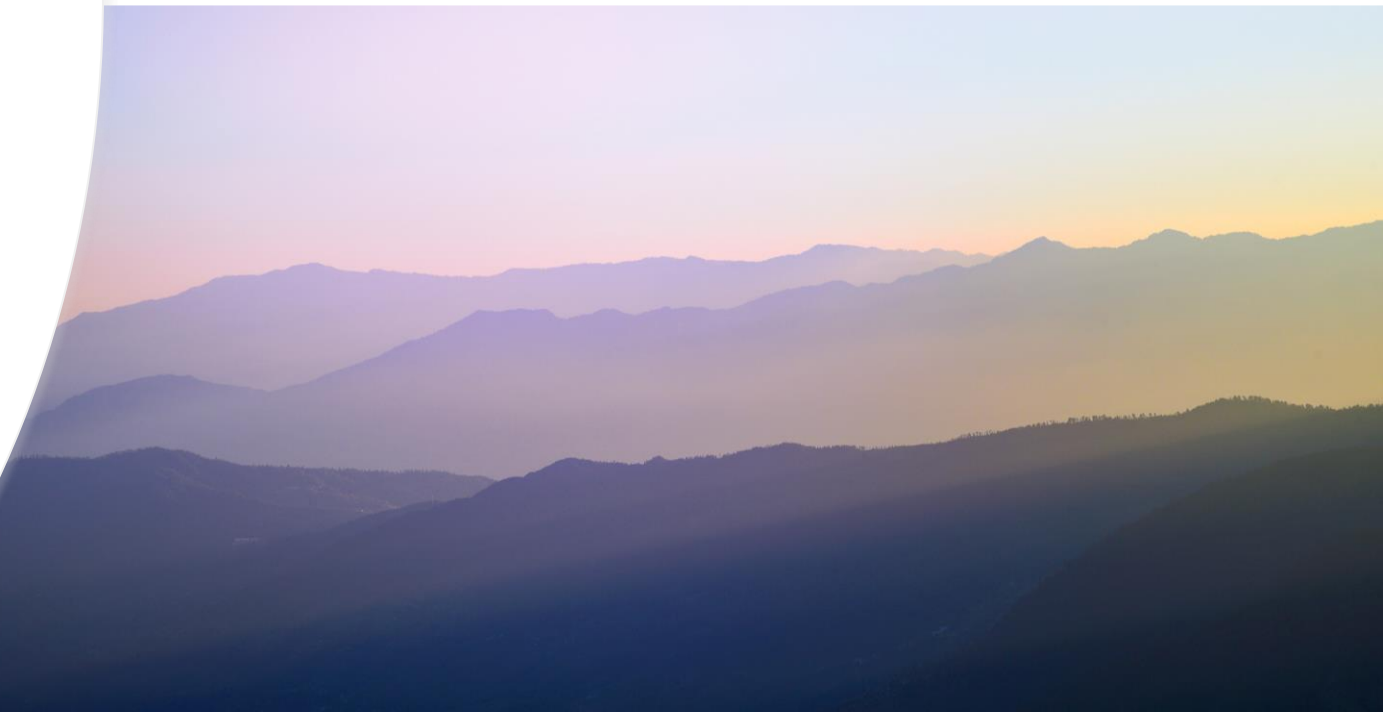


Where

- Carve out quiet space (if you can!)
- A place for writing (not paying bills or answering emails)

When

- Carve out time
- Be realistic!
 - Structured schedule, but flexible
- Expect days you don't write well, or at all
- Pay attention to what works for you



How



PREP YOUR ENVIRONMENT
(AND YOURSELF)



WRITE



REWORK

The UW Palliative Care Program's Writers' Group

- Origins
- Intention:
 - A space for self care and reflection, while developing a skill
 - To teach essential elements of craft and inspire people to enjoy--or at least find gratification in--the creative process
- Funding

Narrative Medicine for Doctors

by Emma Komlos-Hrobsky

NEWS AND TRENDS

[November/December 2019](#)

10.9.19



Toby Campbell understands that storytelling is good medicine. As an oncologist and associate professor in the Hospice and Palliative Medicine Fellowship Program at UW Health—the academic medical center and health system at the University of Wisconsin in Madison—he teaches fellows that communication with patients is not about delivering statistics but rather helping them to imagine possible outcomes for their care. In Campbell and his fellows' specialty, these outcomes are often inherently grim. New doctors assume a significant emotional burden as they lead patients through end-of-life care; seasoned clinicians must resist becoming jaded to their work while finding ways to replenish their own emotional resources. This is where Campbell sees another, perhaps more surprising place for storytelling: in helping doctors to process and sustain their most demanding work.



Michelle Wildgen and Dr. Toby Campbell.



Schedule/Format/Attendees

- Schedule
 - One meeting per month x 7 months
 - First Tuesday morning of the month
 - 1 hour 15 minutes (7:30-8:45 am)
- Format
 - Prepandemic: face to face, on hospital campus
 - Intrapandemic: virtual
- Attendees: no more than 8 total
 - 4 palliative care fellows
 - 4 other doctors

Class content

Technical, craft-based exercises

Generative prompts

Handouts

Brief readings

Writers read their work aloud, others listen

Public reading

Narrative Medicine

- Is about connection
- Is infinitely adaptable
- Has a continuum of cost
- Is instantly available to you and your team!



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Resources/Tools

- Books of prompts
 - *Naming the World* by Bret Anthony Johnston
 - *A Writer's Book of Days* by Judy Reeves
- Poets & Writers' online magazine: www.pw.org
- Read what makes you want to write!
- Where to access others' stories: medical journals (e.g., JAMA's "A Piece Of My Mind" column), Twitter, KevinMD, The Nocturnist, VA's "My Life, My Story" podcast
- Contact us:
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