Implementing a Narrative Medicine Practice

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Great Lakes Palliative Care Conference
Lake Geneva, WI
May 6, 2022
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 ≥ 27, DP ≥ 10)

<table>
<thead>
<tr>
<th>Profession</th>
<th>Rate of Burnout</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians</td>
<td>33.6%</td>
</tr>
<tr>
<td>Nurses</td>
<td>31.9%</td>
</tr>
<tr>
<td>Social Work</td>
<td>29.7%</td>
</tr>
<tr>
<td>Other*</td>
<td>31.0%</td>
</tr>
</tbody>
</table>

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

Kamal et al 2019
How health care workers feel about going to work these days:

- **Hopeful**: 59%
- **Motivated**: 59%
- **Optimistic**: 56%
- **Burned out**: 52%
- **Anxious**: 43%
- **Angry**: 21%

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.

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?

- Self-awareness
  - Recognizing emotions
  - Self-regulating emotions

- Reflection
  - Finding meaning in daily work
  - Returning to your values and purpose

- Evolution
  - Struggle
  - Adapting
  - Changing mindset
  - Growth mindset

- Transformational Growth
  - Resilience

Decrease cortisol
Psychological safety
Increase positive emotions
Interpersonal insight
Creative empowerment
Learn ethics
Teach values
Strengthen social connections

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

Charon 2001
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

Wear 2012
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


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

William Rafelson, a, b Jane Bruno, c Don S. Dizon d a, b, c

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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
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
<table>
<thead>
<tr>
<th>Class content</th>
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</thead>
<tbody>
<tr>
<td>Technical, craft-based exercises</td>
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<tr>
<td>Generative prompts</td>
</tr>
<tr>
<td>Handouts</td>
</tr>
<tr>
<td>Brief readings</td>
</tr>
<tr>
<td>Writers read their work aloud, others listen</td>
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<tr>
<td>Public reading</td>
</tr>
</tbody>
</table>
Narrative Medicine

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


• Dawes RM. A message from psychologists to economists: Mere predictability doesn’t matter like it should (without a good story appended to it). *J Econ Behav Organ*. 1999;39:29–40.


• Schoenau MN, Jackson IM. Effectiveness of storytelling interventions on psychosocial outcomes in adult patients with a life-threatening illness. *JBI Database of Systematic Reviews and Implementation Reports.* 2016;14(6):52-60. doi: 10.11124/JBISRIR-2016-002528


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](http://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:
  • Liana Eskola: [leskola@medicine.wisc.edu](mailto:leskola@medicine.wisc.edu)
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