

Presence 5 for Racial Justice: Disrupting racism through physician-patient communication

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BACKGROUND

- Anti-Black racism is a major contributor to health disparities
- Many clinicians do not have tools or language to question internalized biases or address personally-mediated racism.

OBJECTIVE

Identify clinician communication strategies that address racism and promote health equity.

METHODS

Mixed Methods Community-Based Participatory Research Design

Community Advisory Board (n=12)	Literature Review	Patient Interviews (n=37)	Presence Circles for Clinicians (n=24)	Non- Clinician Interviews (n=40)
Monthly meetings with patients, physicians, community	Review of medical & social sciences liiterature to identify evidence-	Interviews with Black patients to learn about preferences	Discussion groups with clinicians from each of the 4	Interviews with diverse non-clinical professionals
members from 4 clinics that predominantly serve Black patients	based communication strategies that address raicsm and promote health equity	around clinician anti-racism communication practices	clinics reflecting on the Presence for Racial Justice practices	to learn about interdisciplinary anti-racism practices that apply to healthcare



PRESENCE 5 FOR RACIAL JUSTICE

Prepare with Intention

Familiarize yourself with the person you are about to meet, keeping an open mind about the values and perspectives they might bring to the visit. Consider how your identity and all biases (implicit/explicit) could influence the encounter.



Sit down, lean forward, don't interrupt. Position yourself to listen for your patient's experiences with anti-Black racism.

Agree on what matters most

Find out what your patient cares about. Be mindful to avoid your own bias about what they should care about. Incorporate your patient's priorities into the visit, and develop a plan together that addresses your patient's goals.

Connect with the Patient's Story

Acknowledging social and environmental factors influencing your patient's health, and focus on positive efforts and events.

Explore Emotional Cues

Tune in to racial trauma. Notice and name your patients' emotions based on their facial expressions and body language to become a trusted partner.

- · Consider how your identity might influence potential biases about your patients
- Prepare to address your patient's social determinants of health by providing community/clinic
- · Have a plan and clinic protocol to address bias when you recognize it
- · Position yourself to be receptive, listening for your patient's experiences with anti-Black racism
- Take note of how individual and institutional biases have influenced your patient's experiences
- Avoid making monolithic assumptions about your patient
- Avoid biased assumptions about patients' top priorities, goals, and values
- · Include the patient fully in decision-making to build trust and prevent stereotyping
- · Consider offering appropriate referrals to interdisciplinary staff when indicated by the patient's presentation
- · Consider historical instances of racism that may be a part of your patient's story. Follow your patient's lead when discussing historical racial trauma.
- Convey openness to patient's individual beliefs
- Celebrate effort and progress using positive language to promote trust and partnership
- Ask to confirm emotions you see or hear, and follow up with what you can do to address this
- · Recognize emotions tied to racial trauma and explicitly name racism
- · Consider how current events may affect your patient's mental health and feelings of safety

CONCLUSIONS

The Presence 5 for Racial Justice practices emerged from partnered research with clinics that predominantly serve Black patients, and drew on a review of the medical and social sciences literature, interviews with Black patients, discussion groups with clinicians, and discussions with non-medical professionals who work with Black clients and communities.

Future research should evaluate how the practices influence the clinician-patient relationship in the clinical setting, and whether patients and clinicians find them effective in addressing racism and promoting health equity during a clinical encounter.

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