

Developing an Upstream Mindset

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Montana Primary Care Association

Road Map



- The Problem with a Treatment Only Mindset
- The less discussed factors that impact physical and mental health
- Empathic Interviewing



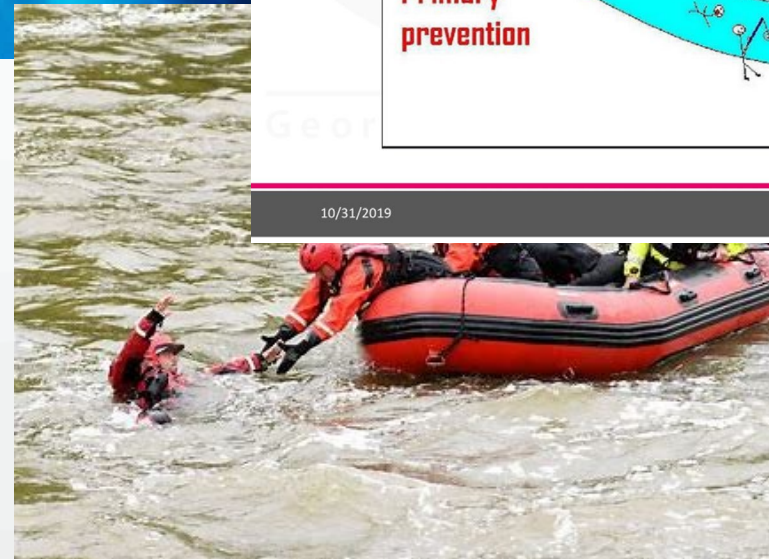
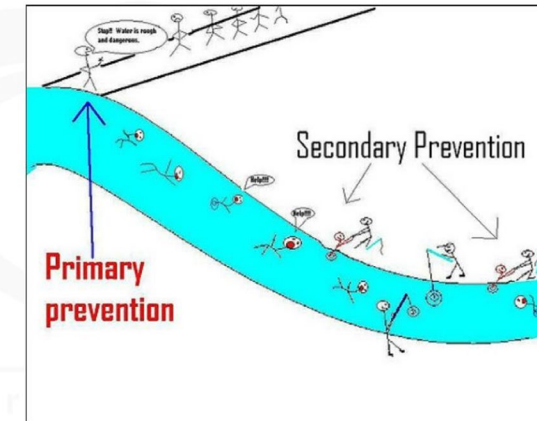
Acknowledgement:



Allegory



Upstream Prevention



Generational Trauma



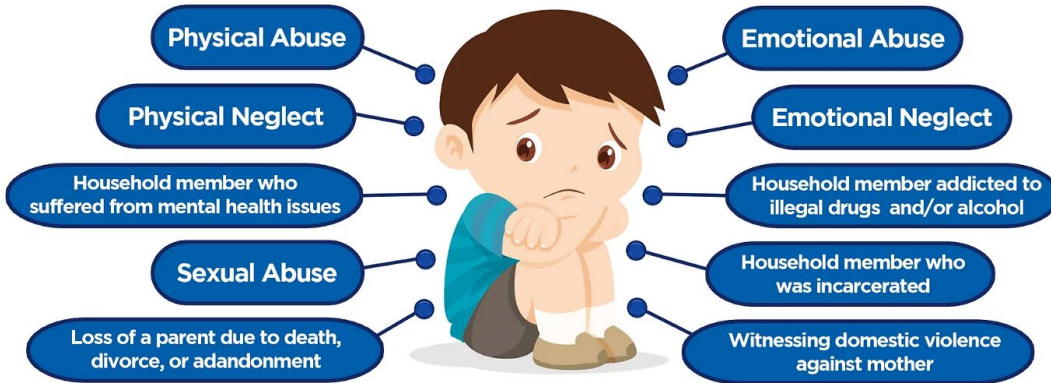
**What happens
in childhood**

**Doesn't always stay
in childhood**



ACES

ADVERSE CHILDHOOD EXPERIENCES INCLUDE:



ADVERSE CHILDHOOD EXPERIENCES HAVE BEEN LINKED TO:

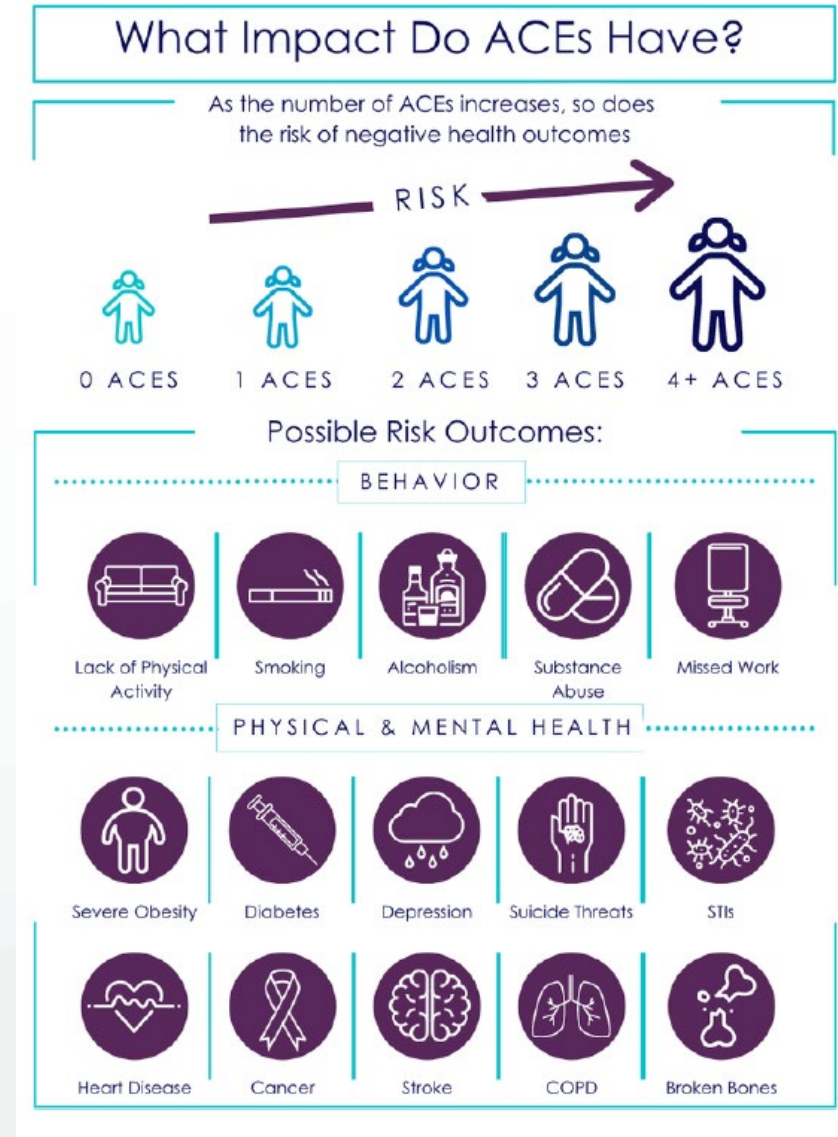


- About 64% of adults in the US reported at least one ACE before age 18.
- Nearly one in six (17.3%) adults reported 4+.
- 3 in 4 high school students reported one or more.
- 1 in 5 experienced 4+.

[About Adverse Childhood Experiences | Adverse Childhood Experiences \(ACEs\) | CDC](#)

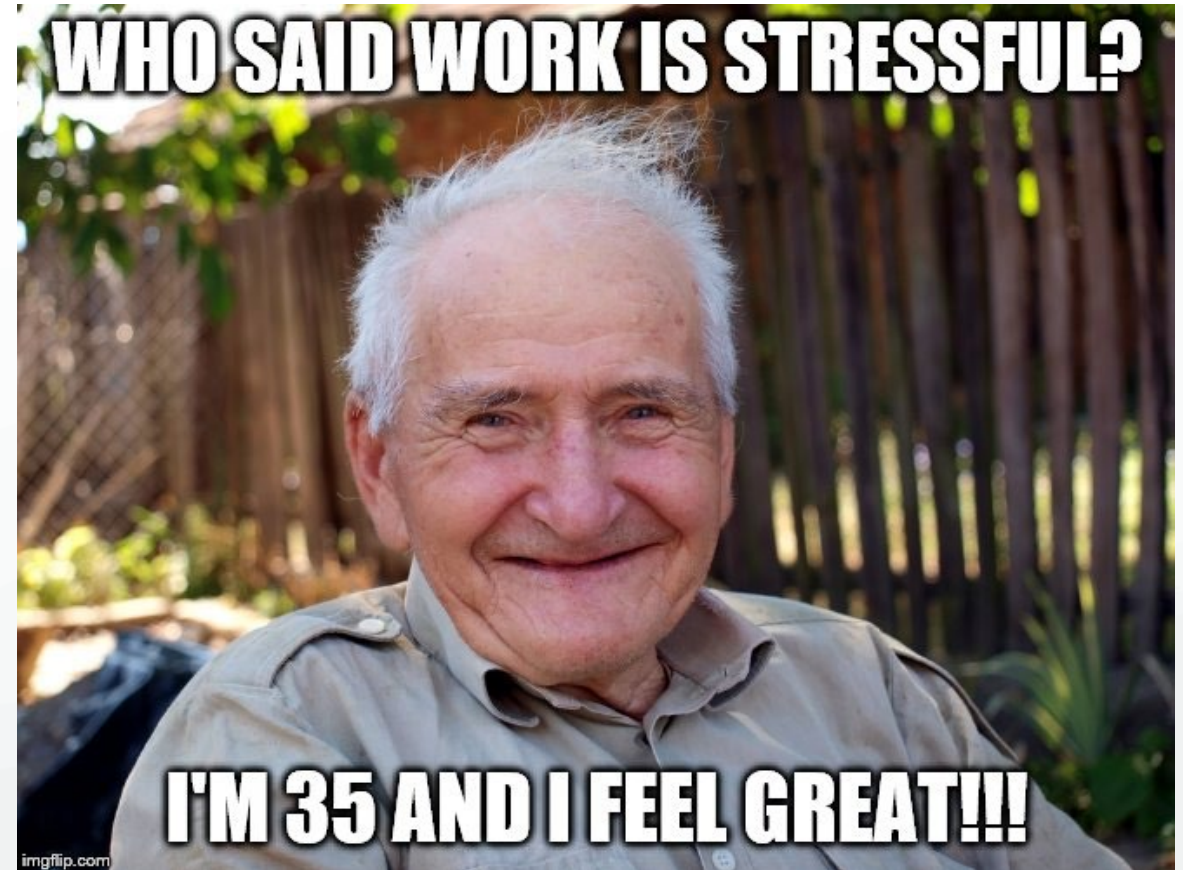


- 1.9 million heart disease cases and 21 million depression cases could have been avoided by preventing ACEs.
- Preventing ACEs could reduce suicide attempts among high school students by as much as 89%, prescription pain medication misuse by as much as 84%, and persistent feelings of sadness or hopelessness by as much as 66%.



Meanwhile...

- More and more babies are being thrown in the river – or even born in the river...
- And fewer people are entering healthcare and helping professions.



“

Much of what we call personality is not a fixed set of traits, only coping mechanisms a person acquired in childhood.

- Gabor Mate

”

Survival Skills

- People have great survival skills.
- The brain is wired to keep us safe!
- How we get our needs met.

Conversation:

- What have you noticed in the clients you work with about lessons they've learned about the world and how to navigate situations?
- What have they learned about accessing healthcare, dental care, behavioral healthcare, etc.?
- Is there anything WE can do about this?



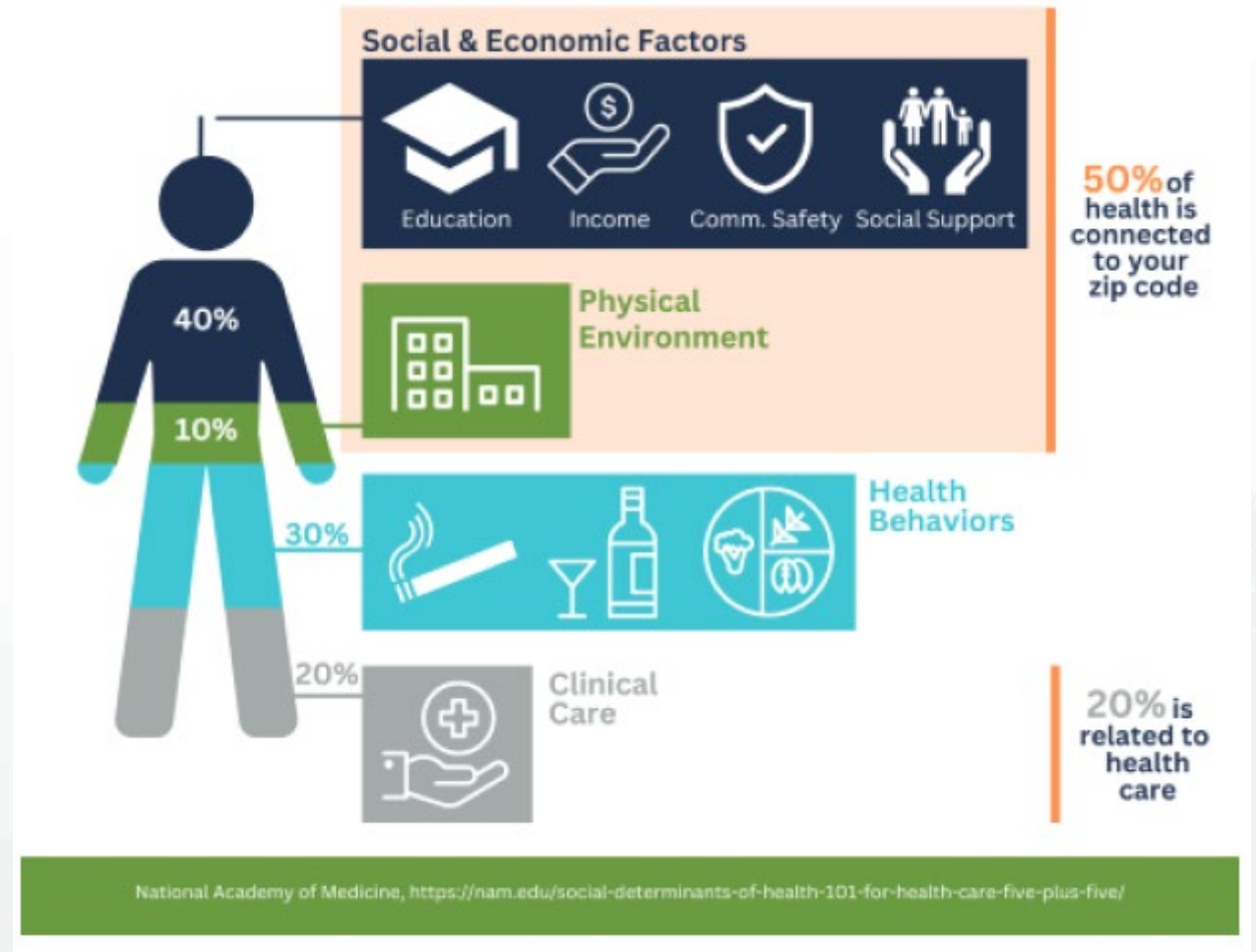
Some Data:

- 1 in 10 Americans lives in poverty. (35.9 Million people)
- About 1 in 10 Americans don't have health insurance and are unlikely to engage in primary care services.
- About 41% of women and 26% of men experienced sexual violence, physical violence, or stalking by an intimate partner during their lifetime.
- Loneliness increases risk of heart disease by 29% and the risk of stroke by 32%. (The equivalent of smoking 15 cigarettes per day)
- According to the Surgeon General, 1 in 2 adults have measurable levels of loneliness.
- Over 61 million women and 53 million men have experienced psychological aggression by an intimate partner in their lifetime.
- According to Zillow, the current average home value in Montana is \$454,476...(\$10,000 less than last year)



Discussion:

Why do you think is health behaviors and addressing social and economic needs are secondary in terms of our treatment approach when we have such strong data about their impact?



Normalize

- Given the data, we need to educate and discuss needs in the same way we take blood pressure.
- Provide assistance when it is needed.
- And educate our patients that we are available.
- Maybe they don't need support today, but they may someday, or they maybe have a loved one who does...

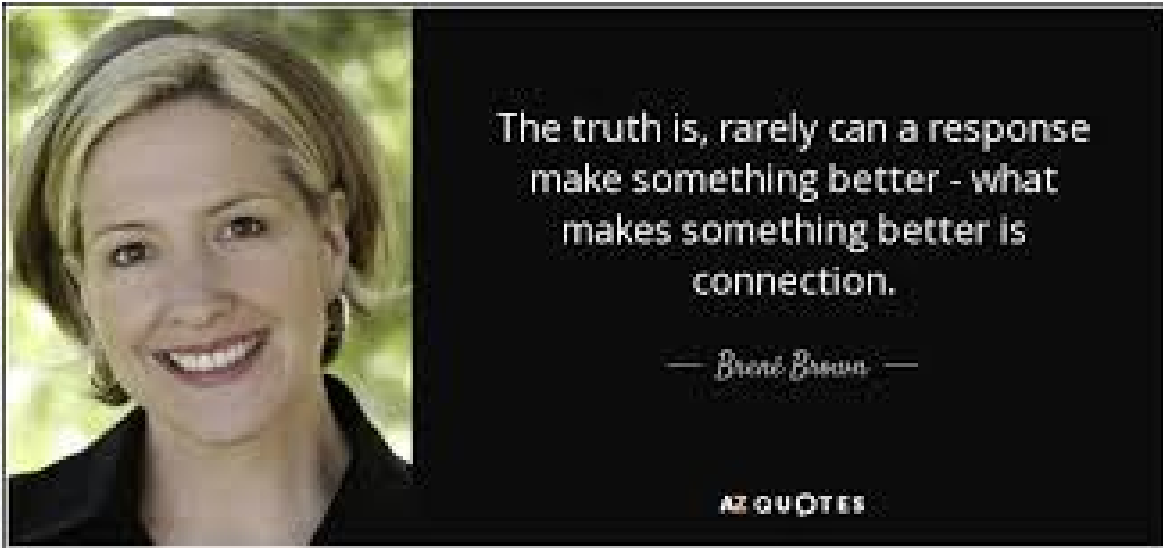


Screeners:

- There are many tools for assessing resources available:
 - PRAPARE
 - AHC-HRSN
 - THRIVE
 - The EveryONE Project
- And regardless of the screener you use, the preferred method for gathering information is Empathic Inquiry



Empathic Inquiry



- A culturally humble, compassionate conversation using motivational interviewing skills to explore resource needs
- Is patient-centered, nonjudgemental, sensitive and empowering
- The interviewer is direct in explaining the reasons for the discussion and uses active and reflective listening to connect



Spirit of MI



- Partnership
 - People are experts on themselves, and if they are the ones wanting to change, you need THEIR expertise!
- Acceptance
 - Belief that people have inherent worth and do not need to earn or prove that they deserve respect.
- Compassion
 - A commitment to support positive growth that is in the best interest of your patient.
- Empowerment
 - Helping people realize and use their own strengths and abilities.
 - *Adjusted in the 4th Edition to emphasize the importance of people's own strengths, motivations, resourcefulness, and autonomy.*



Step 1: Permission

Introduce yourself and your role.

"My name is Jamie and I am the CHW on your care team. My job is to talk to patients about their physical needs and educate them about resources that might be helpful in their situation because we know that access to certain physical resources can impact health."

"Would it be ok if we have a quick conversation about your access to the social drivers of care? This will only take about 10 minutes."

"Some of these questions may feel sensitive, and it is ok to let me know if you don't feel comfortable answering."



Maslow's hierarchy of needs



What if they say no!



- “Ok, no problem. Thank you so much for your time today. This is my name and number. If something comes up and you need extra support related to resources like food, transportation, paying utilities, insurance, work, childcare, or other physical needs, please give me a call!”



An Ounce of
Prevention
is Worth a
Pound of
Cure

Ben Franklin

Normalize

- To get upstream, we **MUST** normalize that we all experience hardship!
- That means asking questions openly and educating patients.
- If 1 in 2 people in our country are lonely, and loneliness impacts health the same as smoking 15 cigarettes a day, then helping professionals should be **REALLY** busy!



Step 2: What Don't I know?

- *“Before we get started, do you have any questions or comments for me?”* (Maybe they already know what they need...)
- Open Ended Questions:
 - a. “What, if any, bills are you worried about this month?”*
 - b. “What are your concerns about accessing resources you need?”*
 - c. “How does transportation impact your ability to get to and from medical appointments, meetings, work, or other appointments/locations?”*

OARS

Core Skills in Motivational Interviewing

Open Questions

O

open-ended questions to encourage patients to confront their behaviors.

Affirmations

A

statements about who the individual is as opposed to praising behavior.

Reflections

R

Praise, recognition, and understanding to help move the client forward in discussing a problem.

Summarizing

S

reflect back to the patient to highlight change talk, clarify motivation, and focus session.

CHES
HEALTH SOLUTIONS

Step 3: Active and Reflective Listening

- Show understanding through attentive non-verbal listening cues, including eye contact and body language as appropriate.
- Express understanding through reflective listening.
 - *“You are tired of bouncing between houses.”*
 - *“Getting help with your electricity bill sounds like the highest priority.”*
 - *“That must be really hard. Thank you for sharing. Can I tell you what I know about ____? (Ask, Offer, Ask)”*



Step 4: Affirmations

- Provide affirmations of patient's strength and resilience.
 - *"You have worked hard to make ends meet. You are clearly resourceful and creative."*
 - *"It takes a lot of strength to get through such a tough situation."*
- *Be Authentic!*
- *Remember:*
- Affirmations can evoke change talk and confidence!



Step 5: Summarize

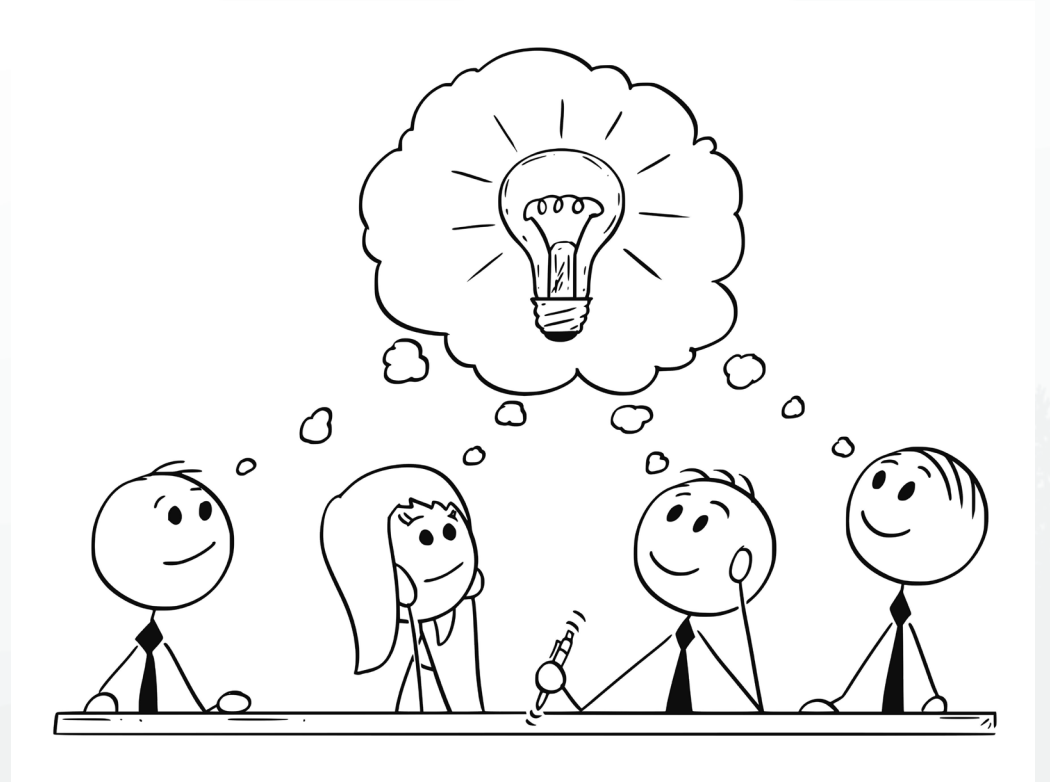
WHEN IN DOUBT
JUST BE
KIND

- *"We've talked about a few different things that you've been experiencing, trouble paying your rent and having enough food for your family. You're also feeling kind of lonely and disconnected. It sounds like getting access to food is the most important right now. Is that right?"*
- *"I'd like to refer you to an organization in the community that can help. How do you feel about that?"*
- *"I think that would be ok – thank you."*
- *"Thank you for sharing with me. I appreciate your openness and I'm hopeful we can find help. This will be a step toward improving you and your family's health."*
- *"Can we schedule a phone call or in person follow up to make sure that we are on track with helping you access the Food Bank?"*
- [Collaborative Screening | Guidance for Safe and Meaningful Interactions — Waterwheel Health Consulting](#)



Discuss!

- How are you gathering information about client physical needs currently?
- Is there anything you would change about your workflow?



Next Time

Wednesday, January 7th 9:00-10:00

Session 5: Finding Focus

You've built rapport, connected with resources, and are using the Spirit of MI. Your patients love you, but they still can't seem to stay on topic or set an explicit goal. Now what? In this session, we will work on helping our patients to set targeted, individualized goals.

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Resources:

- [Resources | Adverse Childhood Experiences \(ACEs\) | CDC](#)
- [Social Determinants of Health - Healthy People 2030 | odphp.health.gov](#)
- [About Intimate Partner Violence | Intimate Partner Violence Prevention | CDC](#)
- [Montana Housing Market: 2024 Home Prices & Trends | Zillow](#)
- [Our Epidemic of Loneliness and Isolation](#)
- [Social isolation, loneliness can damage heart and brain health, report says | American Heart Association](#)
- [Loneliness is at epidemic levels and it's killing Americans](#)
- [Health Partners on IPV + Exploitation](#)
- [Empathic Inquiry - Oregon Primary Care Association](#)

