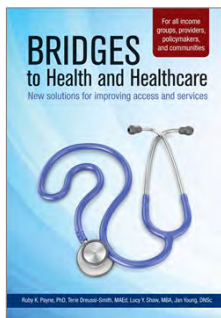


“I’m Not Mad At You ... My Job is to Save Your Life ...”

A Look at “The Providers” documentary and The Bridges Relational Model in Healthcare



Facilitated by
Terie Dreussi-Smith

Coauthor, *Bridges Out of Poverty: Strategies for Professionals and Communities* and *Bridges to Health and Healthcare: New Solutions for Providing Access and Services*



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Brainstorm:

Who is the “Complicated Patient”?

“People with excessive needs”



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University of Notre Dame Ines Jindra and Michael Jindra



Connecting Poverty, Culture, and Cognition: The Bridges Out of Poverty Process

TdS

- ▶ Participant observation of participants for two years of attending Getting Ahead classes, trainings, meetings, and other activities.
- ▶ 39 graduates interviewed.
- ▶ Codes for perception of Getting Ahead, personal background, experiences with poverty, and progress after completion of Getting Ahead.
- ▶ Rated on how far they came in accomplishing the goals they set for themselves.
- ▶ 18 successful, 17 modestly successful, 4 unsuccessful.

Journal of Poverty. doi:10.1080/10875549.2019.1204644



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Success After Bridges by Experienced Poverty Type



Type total 39	Situational Poverty 14	Generational Poverty 19	A mix or unclear 6
Successful 18	8	8	2
Moderately Successful 17	6	8	3
Not successful 4	0	3	1

TDS



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Relational vs. Structural Models



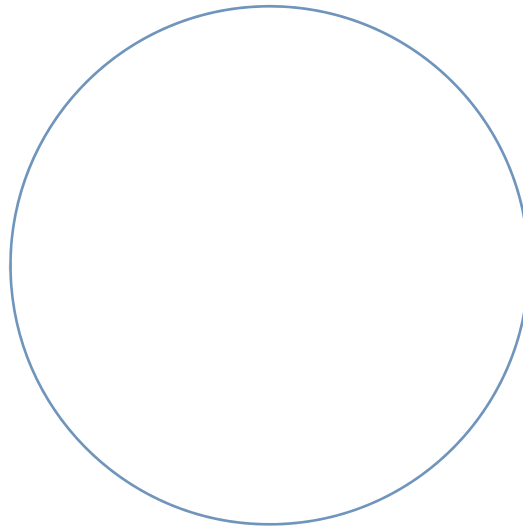
- Many academics argue for policy changes to lower poverty and inequality. Yet this “top-down” view often ignores or underestimates the challenges presented by the life situations of those who haven’t been socialized into the historically particular mode of [STABLE AND SECURE] productivity or of those who for various reasons find it difficult to keep up with it.
- This is where [MODELS] like Bridges ... step in. We face not only structural issues with fewer high-paying jobs, but also intense cultural divisions (Jindra, 2014) that are heightened by segregation and isolation (Sampson, 2012).
- Breaking down these barriers and giving people more tools to use can be an important part of the battle against poverty and inequality.



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How does the “complicated patient” spend time?



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Healthcare is a Relationship: “The Providers”



Chris Ruge, a former trucker, is a nurse practitioner who travels throughout the area treating indigent patients at their homes. We see him dealing with several, including an alcoholic man who suffers a near-fatal relapse and an elderly woman who begs him to increase the dosage of her pain medication.



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Changing the Rapport



- **Interviewer:** You talk very frankly about addiction. You even go through your patient’s refrigerators and talk about healthy eating. How do you establish those kinds of relationships and build that kind of trust?
- **Chris Ruge:** The core work that really needs to be done really is building relationships and establishing trust. I look at it as my number one priority to establish relationships with my patients. It makes it more likely they will be able to tackle some of the more difficult tasks I put in front of them.



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Your Voice:

How do you use the Hidden Rules of Economic Class and other aspects of Bridges to:

“Focus on changing the rapport rather than changing the behavior.”

–Suzie Johnson, Peterborough, ON

Building rapport makes my job a lot easier. I look at it as my number one priority to establish relationships with my patients.

–Chris Ruge, NP



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Module 4

Hidden Rules of Group Worksheet

Fill in the chart of hidden rules below:

1. **Mark F** for each that you or your family believes.
2. **Mark I** for each that your institution believes.
3. **Mark C** for each that your community believes.

	Poverty	Middle Class	Wealth
POSSESSIONS	People.	Things.	One-of-a-kind objects, legacies, pedigrees.
MONEY	To be used, spent.	To be managed.	To be conserved, invested.
PERSONALITY	Is for entertainment. Sense of humor is highly valued.	Is for acquisition and stability. Achievement is highly valued.	Is for connections. Financial, political, social connections are highly valued.
SOCIAL EMPHASIS	Social inclusion of the people they like.	Emphasis is on self-governance and self-sufficiency.	Emphasis is on social exclusion.
FOOD	Key question: Did you have enough? Quantity important.	Key question: Did you like it? Quality important.	Key question: Was it presented well? Presentation important.
CLOTHING	Clothing valued for individual style and expression of personality.	Clothing valued for its quality and acceptance into norm of middle class. Label important.	Clothing valued for its artistic sense and expression. Designer important.
TIME	Present most important. Decisions made for moment based on feelings or survival.	Future most important. Decisions made against future ramifications.	Traditions and history most important. Decisions made partially on basis of tradition and decorum.
EDUCATION	Valued and revered as abstract but not as reality.	Crucial for climbing success ladder and making money.	Necessary tradition for making and maintaining connections.
DESTINY	Believes in fate. Cannot do much to mitigate chance.	Believes in choice. Can change future with good choices now.	Noblesse oblige.

(continued on next page)

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Bridges Out of Poverty Training Supplement



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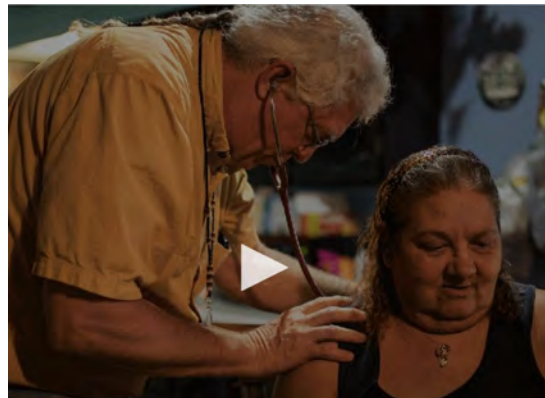


As a parent I have had some incredible role models in my patients. I have seen many truly wonderful parents through the years with far less resources than I've had, and I've tried to emulate them.

–Dr. Leslie Hayes



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This core work is really done in relationships. Treating the complicated patient like you would treat anyone else you have a lot of respect for.



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Your Voice:



How much humility and respect does it take to build rapport and trust?

How does Bridges help us see and analyze our own societal lens?

Interviewer: You're very non-judgmental.

Chris Ruge: You have to leave YOUR past at the door. I tell people—you have to wipe the slate clean and it isn't about me. And if it is about me at the beginning of the visit, I have to get that off the table.



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What areas of the Bridges lens impact the new view of how we learn from our patients?



Dr. Hayes expresses her deep respect for her opioid addicted pregnant patients and models her parenting after some of these mothers.



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BRIDGES CONSTRUCTS



1. Use the lens of economic class to understand and take responsibility for your own societal experience while being open to the experiences of others.
2. At the intersections of poverty with other social disparities (racial, gender, physical ability, age, etc.), address inequalities in access to resources.
3. Define poverty as the extent to which a person, institution, or community does without resources.
4. Build relationships of mutual respect.
5. Base plans on the premise that people in all classes, sectors, and political persuasions are problem solvers and need to be at the decision making table.



Source: *Bridges Out of Poverty* Training Supplement, p. 25

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Your Voice:



How does the Bridges Lens help us shift to focus on the smaller successes within health outcomes and lowering cost?

You have to learn to hang your hat on small successes ...

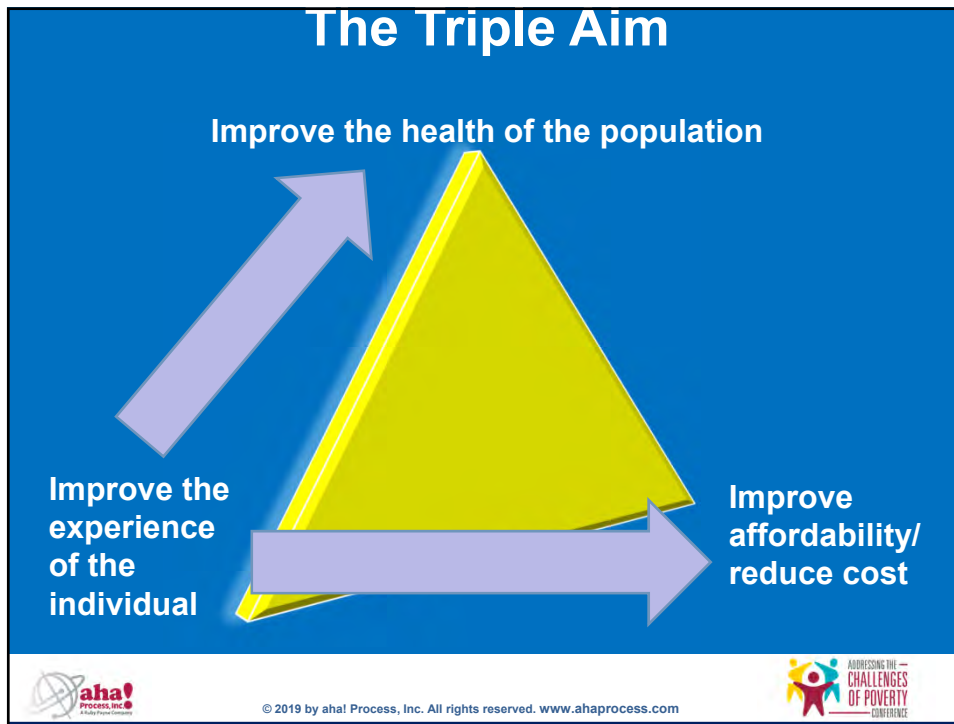
- They opened the door
- They made it to their visit
- They took half their meds
- They survived. They made it through the overdose and so we have a chance to start up again.

—Chris Ruge



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Healthcare Providers—a critical shortage



BRIDGES
to Health and Wellbeing

“Your community needs you... This inspiring movie finds that, for some young professionals, vocations start where they are most needed—at home.”
— Washington City Paper

Matt Probst is a health care practitioner who also serves as El Centro's clinic medical director. We see him desperately struggling to cover empty shifts at the understaffed facility and attempting to recruit doctors.

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Your voice:

What initiatives are working in your community to recruit healthcare workers who grow up in that community?



It's not uncommon for a provider to come for a year and then resign. The evidence is clear—you're much more likely to retain someone if they're from that community.

—Matt Probst



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Understanding and Engaging Under-Resourced College Students

A fresh look at the influence of economic class on teaching and learning in higher education

How co-investigation of economic class transforms the post-secondary culture and creates student engagement

Karen A. Becker, Ph.D. • Karla M. Krodel, MBA • Bethanie H. Tucker, Ed.D.



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Brainstorm



How can you use clips from “The Providers” documentary and Bridges to Health and Healthcare to engage healthcare providers in your community?



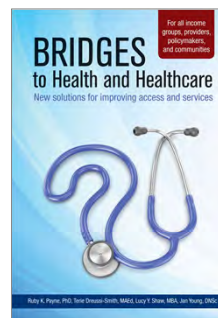
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Thank you for joining the Bridges to Health and Healthcare Community of Practice!



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