Empathy in the Health Professions: An Ally in the Care of Patients with Chronic Diseases

Dr Michael I. Kourakos¹, Dr Eugenia D. Vlachou², Dr Martha N. Kelesi²

¹Director of Nursing, General Hospital "Asklepieio" Voulas, Athens, Greece.
²Associate Professor, Department of Nursing, Technological Educational Institute of Athens, Greece.

Corresponding Author: Dr Michael I. Kourakos

ABSTRACT

Chronic diseases and conditions are among the most common health problems and are often poorly controlled. The ability to recognize a patient’s emotions is an important part of a healthcare provider’s communication skills but chronic disease management is an area where patient concerns are often inadequately addressed. Empathy, which has been described as one of the most frequently reported humanistic components of patient care and an important component of professionalism in medicine can become a valuable ally when considering the care of chronically ill patients.

Key Words: chronically ill, empathy, patient care, skills

INTRODUCTION

Chronic disease care is of particular concern, as chronic diseases have become more widespread and are often poorly controlled. [¹] In Europe, 77% of the disease burden is attributable to chronic diseases, [²] in the EU-28 in 2014, 32.5% of the population aged 16 and over reported a long-standing illness or health problem [³] and according to statistics from the Centers for Disease Control and Prevention, chronic diseases, such as heart disease, cancer, and diabetes, are the leading causes of death and disability in the United States, accounting for 70% of all deaths in the U.S. These diseases also cause major limitations in daily living for almost 1 out of 10 Americans or about 25 million people. [⁴] The prevalence of chronic diseases is rising due to lifestyle shifts, increasing healthcare standards which lead to improvements in longevity and is most relevant to the ageing population. [⁵]

The chronic care model describes chronic care as “the prevention and diagnosis, management, and palliation of chronic disease” and is internationally accepted as the main strategic response to the challenges of chronic disease. [⁶] Care planning for chronic illness should be person centred, given that it involves the person’s day-to-day experience over time as well as the knowledge and action they apply over the long term in managing their health. [⁷] Communication is also known to be essential for accurate diagnosis, treatment choice, adherence, patient satisfaction, as well as for enhancing treatment effects. [⁸] Several lines of evidence have shown that chronic diseases are associated with deficient attitudes, hopelessness, suicidal thoughts, and self-harm factors. [⁹] Clinicians, policymakers, patients, and their families are calling for healthcare providers to move beyond the delivery of services and to consider more clearly the preferences, needs, and values of the individuals who
receive these services. Although empathy is an integral element of professional practice and person-centred care, a body of studies has shown that the experience is less than optimal at many healthcare services for vulnerable patient groups and often lacking in empathy. 

NEEDS OF CHRONICALLY ILL PATIENTS

When acute disease was the leading cause of illness patients were passive recipients of medical care, but nowadays, that chronic disease has become the top threat to human health the patient must become a partner in the treatment process, contributing at almost every decision or action level. This is because patients deserve to be partners in their own health care and because health care can be delivered more effectively and efficiently if patients are full partners in the process.

Being a patient is not only a physical but also an emotional experience, which continually demands adjustments to cope with the inherent stress of being a patient. The ability to recognize a patient’s emotions and emotional health is an important part of a healthcare provider’s communication skills. Several studies indicated that chronically ill patients wished to explore feelings and share emotions with professionals while other showed that relatives provided emotional support, but this may have drawbacks and sometimes relatives can grow tired of providing support. Other studies pointed out that fellow patients were valuable in dealing with emotional challenges while others indicated that patients need professional help for building self-confidence. A number of studies mentioned that sympathy, expressed by listening, showing genuine interest, friendliness and by clear and supportive communication from professionals is valued and in this supportive atmosphere, patients are more likely to be not afraid, to be themselves and to ask questions. Fellow patients were also valued for their empathetic capacity, because they ‘know exactly how you’re feeling’. Empathy enabled to share experiences and to make patients feel they were being listened to.

Chronic disease management is an area where patient concerns are often not addressed adequately. Patients with chronic conditions have reported feeling rushed, embarrassed, or forgetting their concerns during visits to their doctors, while health professionals would tend to focus on managing chronic disease rather than other health issues patients may also be concerned about. As a result, consultations can become a routine checklist of do's and don’ts with little space given to raise other concerns to their caregivers.

Caring for people with chronic conditions should ensure the provision of patient centered care, which includes an understanding of the whole person and each individual's contextual factors. Consideration should be given to the unique circumstances of each patient in order to meet their needs and preferences in an equitable and high quality way. Patient-centered care embraces a less paternalistic model of care, where health care providers express empathy and treat the ‘whole person’, helping patients take an active role in their care and decisions about their health. The caring relationship is fueled by politeness, active friendliness, objectivity, sense of humour and a positive approach where health professionals try to relieve patient’s suffering and actively listen to their concerns. Health professionals also stimulate patients to boost their morale and promote active patient involvement in the treatment process as well as recovery for patients. Once patients feel a sense of security, they will move themselves toward a more positive attitude which may help to build relationships, with the health providers, which are based on mutual respect. This relationship will enable patients to accept their condition and will initiate the changes that are necessary in order return to their daily activities.

DEFINING EMPATHY
The easiest way to get positive outcomes and effective care requires an understanding of patient’s emotional state as well as verbal and non-verbal forms of communication and an attitude of comprehending another person’s feelings, emotions and perspective taking. Empathy is seen to be the key to improving the relationship between a healthcare professional and a patient, which is the heart and art of medicine and a key component in the delivery of health care. The importance of empathy in the therapeutic relationship is related to the aims of those relationships, which include: i] initiation of supportive, interpersonal communication aiming to understand the perceptions and needs of patients, ii] empowering the patient to learn, or cope more effectively with his or her environment; and, iii] reduction or resolution of the patient’s problems. These aims have been the background for several studies which have suggested that empathy can help create an interpersonal climate that is free of defensiveness and that enables individuals to talk about their perceptions of needs. It’s also most agreed that the medical care experience is enhanced by effective communication, basis of empathic understanding between practitioners and their patients.

According to Baile et al. patients often view health professionals as one of their most important sources of psychological support, with empathy being one of the most powerful ways to support the reduction of patients’ feelings of isolation and validating their feelings or thoughts as normal and to be anticipated. Despite some overlap with other compassionate responses, particularly sympathy, empathy is distinct as empathy is not merely cognitive but also requires emotional engagement and resonance with the patient.

Empathy is a multidimensional concept that transcends specific contexts and also it is an elicited emotion in specific situations. Empathy has been recognised as being at the center of the therapeutic process and it is also regarded as the defining characteristic of all health professions. It has been described as one of the most frequently reported humanistic components of patient care, a royal road to treatment, a symbol of healthcare at its best, and an important component of professionalism in medicine and in health care it has been defined as “the competence of a physician to understand the patient’s situation, perspective, and feelings; to communicate that understanding and check its accuracy; and to act on that understanding in a helpful therapeutic way”. Empathy has also been defined as “the ability to precisely examine another person’s perception, feelings and experience without making judgement, and to communicate one’s understanding concisely to the person”. Empathy differs from sympathy and compassion, as they both emerge in situations of perceived suffering but do not lead to co-experiencing the affective state of the sufferer, or pity and it is regarded as a multi-faceted construct that includes various components, ranging from low-level mechanisms, such as emotional contagion to high-level processes, such as perspective-taking.

Empathy consists of three separate dimensions, the cognitive, the affective, and the behavioral empathy. Cognitive empathy refers to the ability to recognize and understand another’s experience and to communicate and confirm that understanding with the other person. It is often mentioned as seeing the world through another’s eyes. As for the affective empathy, it focuses on an appreciation of the emotional state of others and is defined as emotional resonance with the patient. The behavioral dimension focuses on communication skills, the capacity to communicate this understanding to the patient.

Empathy refers to one's ability to understand and share other people's feelings, thoughts or attitudes and is a substantial component of the healthcare professional-patient relationship and a basic dimension of
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patient centered care. Empathy is even more important in rehabilitation medicine, where persons with impairments often report facing attitudinal and environmental barriers when trying to get rehabilitative care and express the need for better communication with their healthcare providers. [29]

EMPATHETIC BEHAVIOURS AND EXPRESSIONS

According to some researchers, empathy is a visible communication behavior that is performed when a healthcare professional recognizes and responds to another person’s suffering. Empathic communication is achieved through vocal interaction which involves talk, touch, eye gaze and other paralinguistic signals and cues that are susceptible to hints or sincere expressions of emotion on the part of a sufferer. As compared with sympathy, which is seen as reflexive, and to a much greater degree under autonomic control, empathic communication is considered as volitional. [30]

Empathy is expressed both through verbal and nonverbal behavior, and the amount of nonverbal behavior varies between 60 and 90% of communication. [31] Although, as mentioned above, most interaction is nonverbal, nonverbal communication skills are not typically taught in courses and the social psychology literature is making significant contributions on the roles that facial expression decoding, posture, tone of voice, and other nonverbal forms of communication play in human interactions. Moreover, linguistic differences between patients and healthcare professionals can be an obstacle to providing optimal care with accurate interpretation of nonverbal signals becoming ever more crucial to understanding patients’ communications of confusion, fears, or disagreement, both at the cultural and interpersonal level. Finally, patients are unwilling to disagree verbally with their health care provider, and exact detection of subtle nonverbal signals may be the basis for discussions leading to shared medical decisions. [32]

The importance of nonverbal empathy in clinical encounters has previously been highlighted, suggesting that specific nonverbal behaviors, including head nodding, forward lean, direct body orientation, uncrossed legs and arms, arm symmetry, and mutual gaze, are associated with positive health outcomes. Providers who are more sensitive to nonverbal cues reinforce the perception of physician sincerity, dedication, and competence, which in turn improves utilization of health services, functional status, and the overall provider-patient relationship. [31] Lorie et al., in their systematic review found that “nonverbal communication plays a significant role in fostering trusting provider-patient relationships and is critical to high quality care”. Other studies found that eye contact and social touch were related to patient perceptions of clinical empathy, while Gorawara-Bhat et al. revealed the salience of “looking” and “listening” in patient-centered communication, and emphasized the need for studying the connection unfolding of both verbal and nonverbal aspects of communication. [33]

Gaze is sometimes considered the key cue in conveying clinical empathy as it offers insight into the mental state of the other. By monitoring the medical specialist’s gaze, the patient can estimate his engagement and if he displays a sincere interest, as patients demand engagement from health professionals. If patient-centered gaze is absent, it is perceived as a signal of disengagement that leads to feelings of exclusion. Similarly to gaze, body orientation communicates engagement with one’s interaction partner, and research in the area of mental health care highlighted the importance of an open body orientation, with a slight forward lean, to decrease the distance between the health professional and the patient and to indicate engagement and interest. [34]
Touch is another nonverbal interaction that is important for the development of empathy, as health professionals sometimes touch their patients to express caring and empathy. Also, longer visit lengths have been associated with higher patient perceptions of a clinician’s empathy. \[35\]

**OUTCOMES OF EMPATHY**

The value of empathy in the establishment of therapeutic relationships is currently unquestioned and has been linked to clinical outcomes in patients across different medical conditions. \[36\] Both patients and health professionals mention empathy as the basis for a humane patient-centred method in general practice, and as an important component of professionalism. A large number of patients, nearly 80%, would recommend an empathic physician to other individuals. \[37\] Health providers who offer empathy tend to be more effective in guiding patients and fostering behavior change and medication adherence, and patients are more likely to reveal nonadherence when they believe their provider cares about them. \[38\] Empathy is also related to increased patient satisfaction, good patient rapport, better diagnostic accuracy, positive health outcomes, \[39\] a better patient's psychosocial adaptation, less psychological distress and less need for information \[40\] and is also a key factor in patients’ definitions of quality of care. \[41\]

Evidence from studies examining patient-health provider communication in cancer consultations revealed many difficulties, because cancer patients suffer from intense emotional agony, especially when they receive bad news about their illness. The physician's ability to empathize has been effective in helping patients adjust to a life-threatening disease and was correlated with a low level of psychological distress. \[42\] In the oncology outpatient clinic, patients who rated their physicians with higher scores for attentiveness and empathy were also more likely to report greater satisfaction, increased self-efficacy, and decreased emotional stress after the consultation. Also, patient with the common cold recovers from illness faster if treated with compassion, as patients who gave their physicians perfect empathy scores reported colds nearly a full day shorter in duration, and were found to have greater activation of a key inflammatory/immune cytokine compared to those with less than perfect empathic providers. \[43\] Physicians’ empathy scores were also associated significantly and uniquely with the prediction of good hemoglobin A1c outcomes for diabetic patients. \[44\]

Moreover, clinical empathy has positive and direct effects on health professionals. Some research has shown that empathy serves a protective role against professional dissatisfaction and burnout and is a potential factor of well-being. Empathy is strongly related to personal accomplishment and job satisfaction for health providers because it enables them to find pleasure and satisfaction in their work. \[40\] For the medical professional, heightened empathetic behaviour can enable greater diagnostic accuracy and reduce the rate of clinical errors and lapses in professional behavior. \[45\]

**CONCLUSION**

Of particular interest is the care for chronic conditions which are increasing in global prevalence. Care planning for people with long term conditions should be person-centred and patient involvement in treatment decisions should be promoted, as it has been found that the delivery of care can be much more effective and efficient when patients are active participants and partners in their own care. Health professionals have a huge impact not just on the physical health of patients, but also their emotional needs that need to be addressed too in a holistic way. A number of studies have pointed out that chronically ill patients seek empathy from their caregivers which is seen to be the key to improving the caregiver-patient relationship and has been mentioned as the basis for a humane patient-
centred care that recognizes the patient as a whole person. Empathy has been found to have positive and direct effects both on patients and health providers as well, so it could be considered as a precious ally to the care of patients with chronic conditions.

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