

# TELL ME MORE:

USING STORYTELLING TECHNIQUES TO ASSESS NEEDS, COMMUNICATE KEY MESSAGES, AND SHOWCASE RESULTS

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# DISCLOSURES:

- Oklahoma Health Care Authority (OHCA): SoonerCare
  - Medicaid
  - Children's Health Insurance Program (CHIP)
- Oklahoma State Department of Health (OSDH)
- American Academy of Pediatrics (AAP)



# HOUSEKEEPING

- Adjust your view to ‘speaker view’
- Please turn your video on!
- Please keep yourself muted when not speaking
- Send chat messages to “everyone.”
- Use the chat box to ask questions — we’ll get to those we can, and keep tabs on those we can answer later in the sessions.
- If you have any technical issues, please privately message Anna on Zoom

# STORYTELLERS



# STORYTELLERS



# STORYTELLERS



# STORYTELLERS



# STORYTELLERS

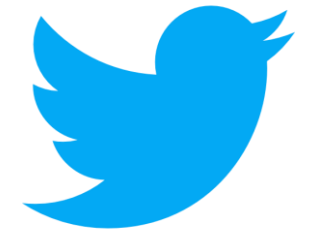
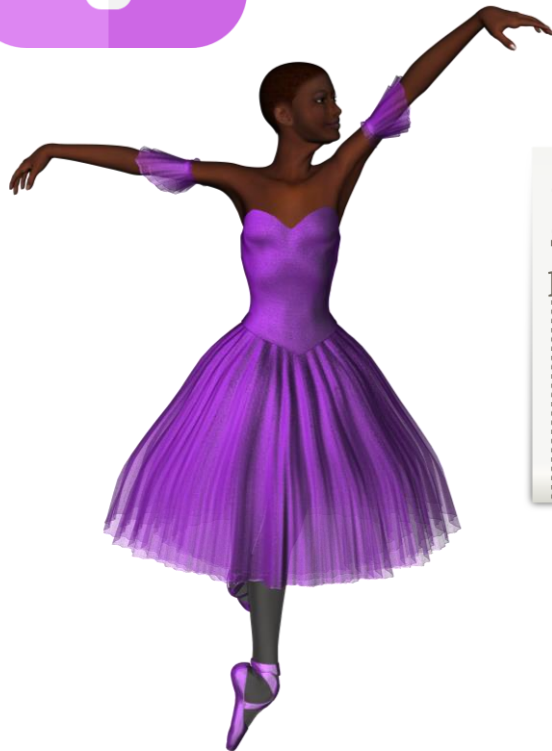




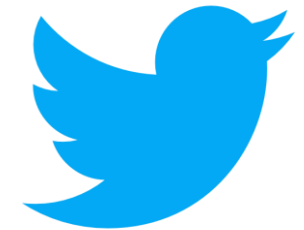
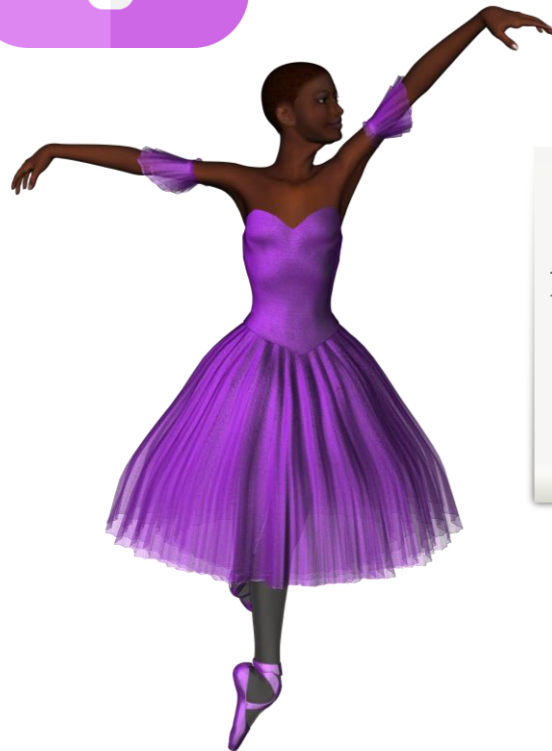
# STORYTELLERS



# STORYTELLERS



# STORYTELLERS



## DATA MAY NOT BE ENOUGH

1. “Change happens by listening and then starting a dialogue with the people who are doing something you don't believe is right.”
2. “Find out just a little bit about the person that you want to change and then you try and tell stories that will.”
3. “Only if we understand, will we care. Only if we care, will we help. Only if we help shall all be saved.”

-Jane Goodall

## PROVIDER STRESS

**Since the COVID-19 outbreak began, the providers I visit:**

- A. Are concerned about becoming infected with COVID-19
- B. Are concerned with infecting their family with COVID-19
- C. Have had to reduce their work hours or have been furloughed
- D. Have more anxiety
- E. Are considering a different practice setting

## PROVIDER STRESS RESULTS

Since the **COVID-19** outbreak began, the providers I visit:

- A. **92%** Are concerned about becoming infected with COVID-19
- B. **89%** Are concerned about infecting their family with COVID-19
- C. **74%** Have had to reduce their work hours or have been furloughed
- D. **72%** Have more anxiety
- E. **56%** Are considering a different practice setting

# NARRATIVE MEDICINE



ELSEVIER

Contents lists available at SciVerse ScienceDirect

## Patient Education and Counseling

journal homepage: [www.elsevier.com/locate/pateducou](http://www.elsevier.com/locate/pateducou)



Medical Education

## Narrative medicine as a means of training medical students toward residency competencies

Shannon L. Arntfield<sup>a,\*</sup>, Kristen Slesar<sup>b</sup>, Jennifer Dickson<sup>c</sup>, Rita Charon<sup>c</sup>

<sup>a</sup> Department of Obstetrics and Gynecology, Western University, London, Canada

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# NARRATIVE MEDICINE

## How Storytelling Can Help Young Doctors Become More Resilient

by [Jessica Zitter, MD, MPH](#)

October 16, 2018

[Summary](#) [Save](#) [Share](#) [Comment](#) [Print](#) [\\$8.95 Buy Copies](#)






# NARRATIVE MEDICINE: SYSTEMATIC REVIEW

## **BMJ Open** Content and outcomes of narrative medicine programmes: a systematic review of the literature through 2019

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Christy DiFrances Remein <sup>1</sup>, Ellen Childs,<sup>2</sup> John Carlo Pasco,<sup>1</sup>  
Ludovic Trinquart,<sup>2</sup> David B Flynn,<sup>1</sup> Sarah L Wingerter,<sup>1</sup> Robina M Bhasin,<sup>1</sup>  
Lindsay B Demers,<sup>1</sup> Emelia J Benjamin<sup>1,2</sup>

# NARRATIVE MEDICINE: SYSTEMATIC REVIEW

## Improvement demonstrated:

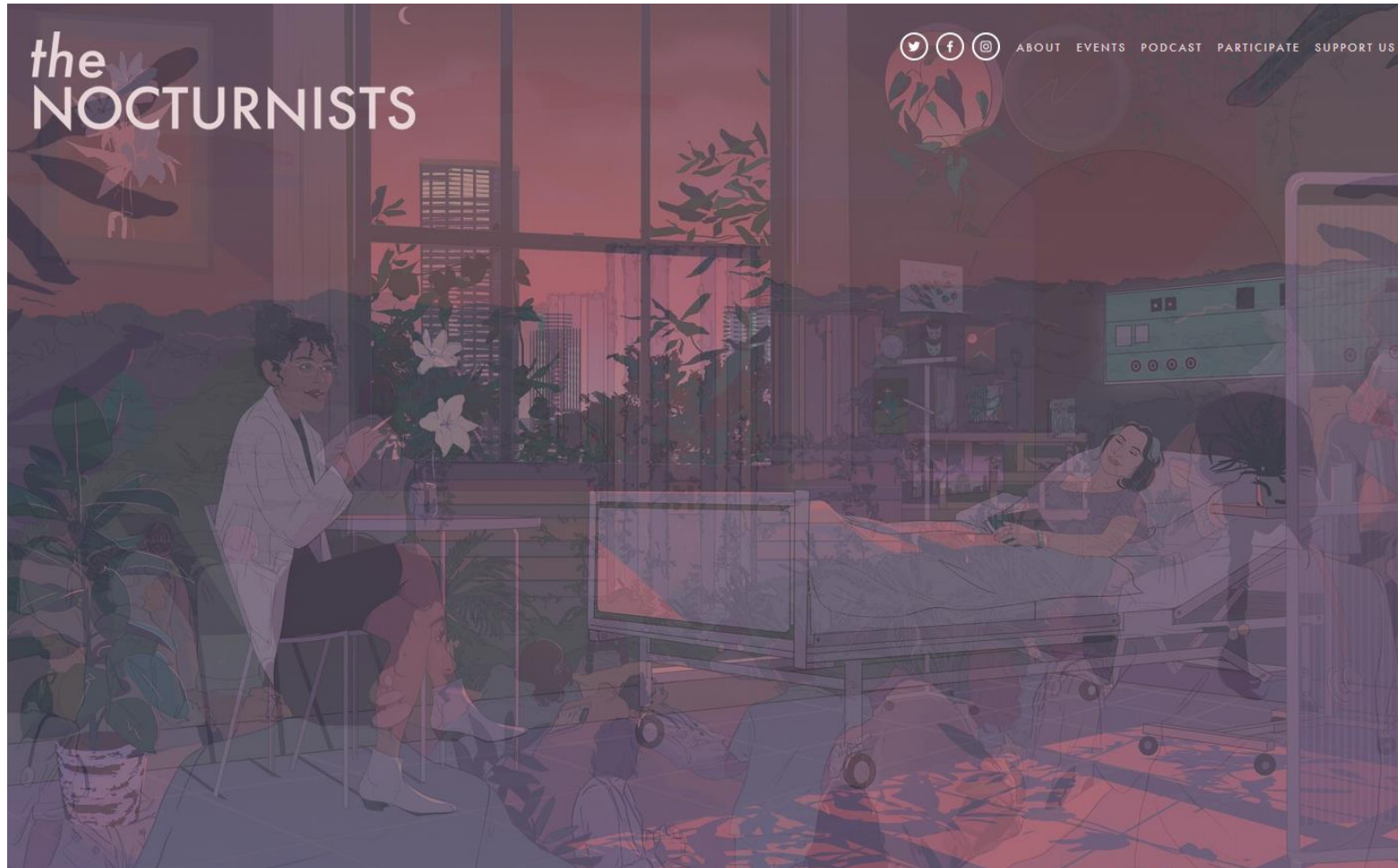
- Enhances communication and team-building skills
- Encourages perspective-taking and reflection
- Promotes empathic behavior
- Detects/mitigates burnout
- Cultivates narrative competence
- Augments pedagogical and clinical skills
- Fosters ethical inquiry

# NARRATIVE MEDICINE: SYSTEMATIC REVIEW

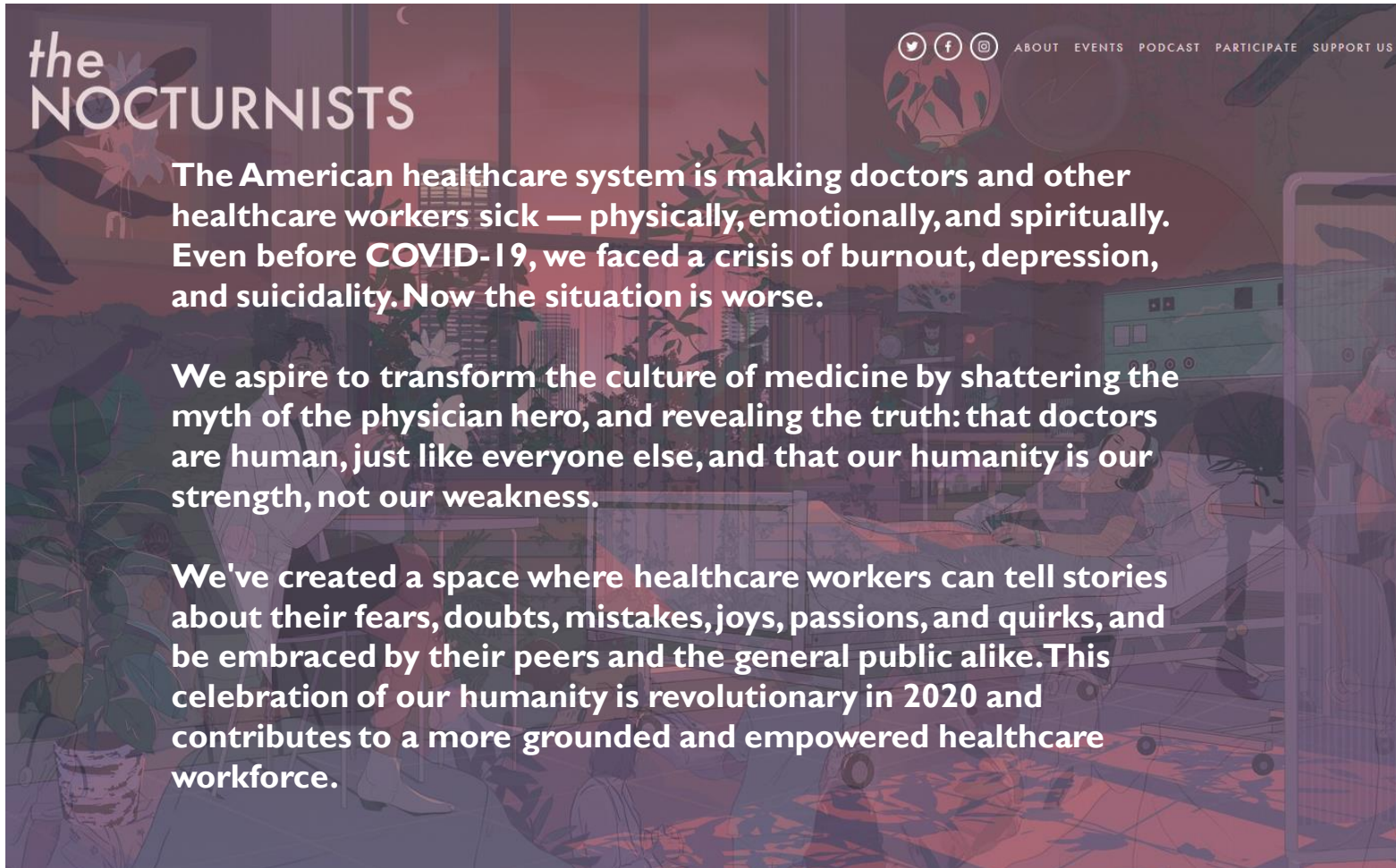
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# NARRATIVE MEDICINE



# NARRATIVE MEDICINE



**the  
NOCTURNISTS**

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**The American healthcare system is making doctors and other healthcare workers sick — physically, emotionally, and spiritually. Even before COVID-19, we faced a crisis of burnout, depression, and suicidality. Now the situation is worse.**

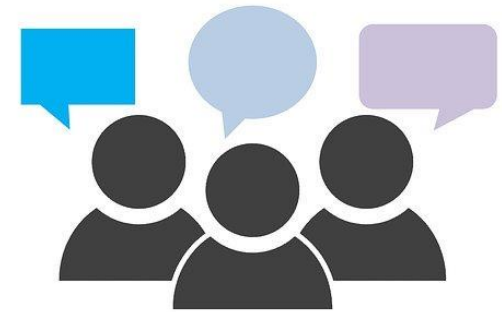
**We aspire to transform the culture of medicine by shattering the myth of the physician hero, and revealing the truth: that doctors are human, just like everyone else, and that our humanity is our strength, not our weakness.**

**We've created a space where healthcare workers can tell stories about their fears, doubts, mistakes, joys, passions, and quirks, and be embraced by their peers and the general public alike. This celebration of our humanity is revolutionary in 2020 and contributes to a more grounded and empowered healthcare workforce.**

# SMALL GROUP SESSION #1

## How this works:

- You'll receive a prompt to join a breakout group
- The discussion prompts will be available to view in your chatbox
- Request "help from the host" if you need assistance from the NaRCAD team
- We'll remind you that you'll need to wrap up 5 minutes before the small group session ends
- We'll bring you back to the large group session



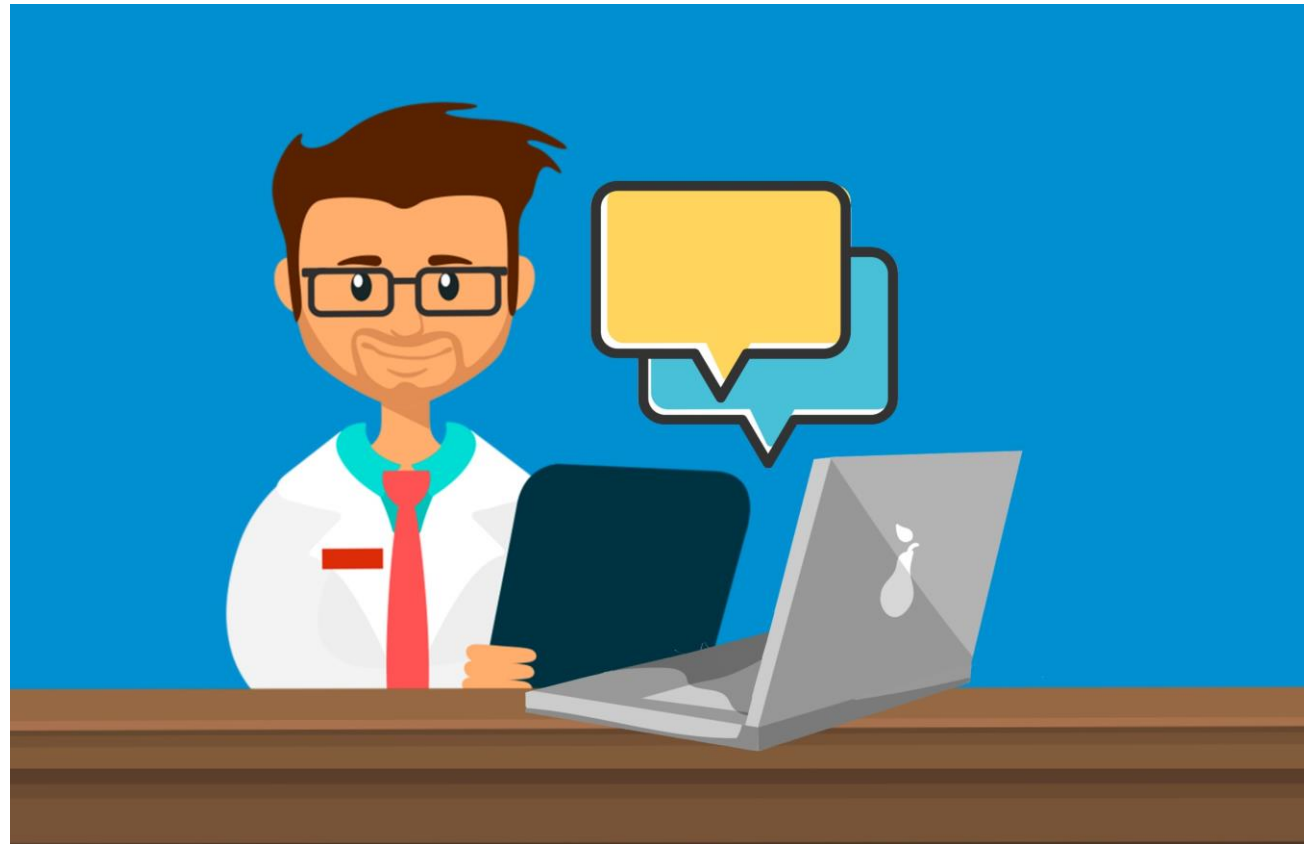
# LARGE GROUP DISCUSSION #1

**Welcome  
back!**

# LARGE GROUP DISCUSSION #1



# USING STORYTELLING TO COMMUNICATE KEY MESSAGES



# STORYTELLING COMPONENTS

- Two ways to persuade:
  - Rhetoric
  - Emotion
  
- Parts of a story:
  - Inciting event
  - Attempt to restore balance
  - Struggle between expectation & reality
  - Opposing forces
  - Scarce resources
  - Difficult decisions
  - Resolution

# STORY TYPES

- Real stories and true stories:
  - Real: Actual people who have experienced or are experiencing the events as described
  - True: Reflect the lived experiences, values, beliefs, and practices of people without identifying details

# STORY DEVELOPMENT

- Set the direction
- Make it personal
- Keep it simple
- Include an element of surprise/tension
- Include a sense of community
- Practice

# STORYTELLING BENEFITS

- Clarifies our perspective
- Providers are more likely to remember
- Deepens provider relationships
- Negotiates a shared understanding
- Promotes specifically positive emotions
- Develops empathy

## SMALL GROUP SESSION #2

### Same as last time:

- You'll receive a prompt to join a breakout group
- The discussion prompts will be available to view in your chatbox
- Request "help from the host" if you need assistance from the NaRCAD team
- We'll remind you that you'll need to wrap up 5 minutes before the small group session ends
- We'll bring you back to the large group session



## LARGE GROUP DISCUSSION #2

**Welcome  
back!**

# LARGE GROUP DISCUSSION #2



## PROGRAM RESULTS

- “Michelangelo said that he did not sculpt marble; he discovered it in the sculpture that was already hidden in the stone that released it.
- In winning proposals, we discover the solution already hidden in the Request for Proposal (RFP) that released it, and finding a cost-effective way to create a larger market that may have discovered us, as we look to our projects to signal us of events to come.
- To win, we must invite the audience to reflect on what the future might look like in their eyes.
- **There will be those who are persuaded by art, and those who are moved by pure science. The challenge is to offer both...”**

**-Robyn Rock**

## PROGRAM RESULTS

- Whose story is this?
- What is this about?
- How do the results link backward and forward?
- Which results warrant attention?

# PROGRAM RESULTS

- Parts of a story, Chapter 2:
  - Inciting event
  - Attempt to restore balance
  - Struggle between expectation & reality
  - Opposing forces
  - Scarce resources
  - Difficult decisions
  - Resolution

## SMALL GROUP SESSION #3

### Same as last time:

- You'll receive a prompt to join a breakout group
- The discussion prompts will be available to view in your chatbox
- Request "help from the host" if you need assistance from the NaRCAD team
- We'll remind you that you'll need to wrap up 5 minutes before the small group session ends
- We'll bring you back to the large group session



## LARGE GROUP DISCUSSION #3

**Welcome  
back!**

# LARGE GROUP DISCUSSION #3

## WRAP UP

**A well-told story will help people:**

- Understand it
- Believe it
- Remember it



**Please rejoin the main room now  
by clicking on the link in the chatbox.**