R-E-S-P-E-C-T: Physician-Patient Communication

Carol Mostow, LICSW¹, Julie Crosson, MD², Sandra Gordon, MD², Sheila Chapman, MD², Eric Hardt, MD², Thea James, MD³, and Peter Gonzalez, MD⁴

¹Department of Family Medicine, Boston Medical Center and Boston University School of Medicine, Boston, MA, USA; ²Department of Medicine, Boston Medical Center and Boston University School of Medicine, Boston, MA, USA; ³Department of Emergency Medicine, Boston Medical Center and Boston University School of Medicine, Boston, MA, USA; ⁴Department of Medicine, Beth Israel-Deaconess Medical Center and Harvard Medical School, Boston, MA, USA.

J Gen Intern Med 29(8):1097 DOI: 10.1007/s11606-014-2870-5 © Society of General Internal Medicine 2014

To the Editors:—Feeling respected by one's physician is the single most powerful predictor of patients' overall rating of their physicians, according to Quigley's welcome study¹ of the CG-CAHPS Consumer Assessment of Healthcare Providers and Systems Clinician and Group large sample of survey data and Frosch's and Tai-Seale's thoughtful editorial.² In reply to the editors' question 'how does one show respect to patients?', we offer the skills model and training materials published in 'Treating and precepting with RESPECT; a relational model addressing race, ethnicity and culture in medical training'. We developed RESPECT because our work as clinicians and educators at an inner city safety net hospital identified essential elements for building trust with patients from backgrounds that differed greatly in culture or power status from their providers. Accumulating data regarding communication disparities further supported these components. RESPECT has received recognition for its contribution to cultural competence scholarship and pedagogy⁴ because it addresses power and difference to build trust with patients at risk for disparities.

Respect will always be important to most patients because of the power differential inherent between expert doctors and the sick and vulnerable who seek our help. As patients bare their bodies, frailties and fears, RESPECT can be an important tool to reduce shame, invite trust and partner effectively, empowering the patient to face the challenges of medical care and the difficult choices needed to improve health. We hope our work can help more clinicians and their patients face the healthcare journey together. As the patient safety movement and academic medical communities increasingly recognize, the environment in which clinicians train and practice also influences the respectful care provided to the patient. We continue to find RESPECT to be a helpful tool wherever power differentials and hierarchy might interfere with trust, communication, learning, collaboration and teamwork.⁵

Corresponding Author: Carol Mostow, LICSW: Department of Family Medicine, Boston Medical Center and Boston University School of Medicine, Dowling 5 South, One Boston Medical Center Place, Boston, MA 02118, USA (e-mail: Carol.Mostow@bmc.org).

REFERENCES

- Quigley DD, Elliott MN, Farley DO, Burkhart Q, Skootsky SA, Hays RD. Specialties differ in which aspects of doctor communication predict overall physician ratings. J Gen Intern Med. 2014. doi:10.1007/s11606-013-2663-2.
- Frosch D, Tai-Seale M. R-E-S-P-E-C-T; what it means to patients. J Gen Intern Med. 2014;29(3):427–8. doi:10.1007/s11606-013-2710-z.
- 3. Mostow C, Crosson J, Gordon S, Chapman S, Gonzalez P, Hardt E, Delgado L, James T, David M. Treating and precepting with RESPECT: a relational model addressing race, ethnicity, and culture in medical training. J Gen Intern Med. 2010;25(Suppl 2):146–54. doi:10.1007/s11606-010-1274-4. RESPECT first appeared in J.Bigby Ed. Crosscultural Medicine. American College of Physicians.2003 p 20.
- Montoya M, Mascaras Y. Trenzas: reflexiones un proyecto de identidad y analisis a traves de veinte anos. Harvard Journal of Law and Gender. 2013;36:486
- Leape LL, Shore MF, Dienstag JL, Mayer RJ, Edgman-Levitan S, Meyer GS, Healy GB. Perspective: a culture of respect, part 2: creating a culture of respect. Acad Med. 2012;87(7):853–8. doi:10.1097/ ACM.0b013e3182583536.