


Write a sentence (10 point):



A hand-drawn musical score on a single staff. The notation includes a treble clef, a 4/4 time signature, two eighth notes, a quarter note, a half note, and a final quarter note. The drawing is simple and appears to be a student's attempt at musical notation.

Finding the Sweet Spot When Caring for Vulnerable Patients

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UCSF Center for Vulnerable Populations @ SF General Hospital



Objectives

- Deconstruct the construct of vulnerable populations
- Present an integrated approach to vulnerable patients
- Demonstrate the importance of eliciting the patient's narrative, assessing for vulnerabilities and identifying points of resilience
- Provide 3 examples of social vulnerabilities & impacts
 - ◆ Limited health literacy
 - ◆ Food insecurity
 - ◆ Intimate Partner Violence
- Find joy and a feeling of alignment in one's work

Vulnerable Populations Defined

- Vulnerable Populations are subgroups of the larger population that, *because of social, economic, political, structural, geographic and historical forces*, are exposed to “greater risk of risks”, and are thereby at a disadvantage with respect to their health and health care.

Exemplar Case

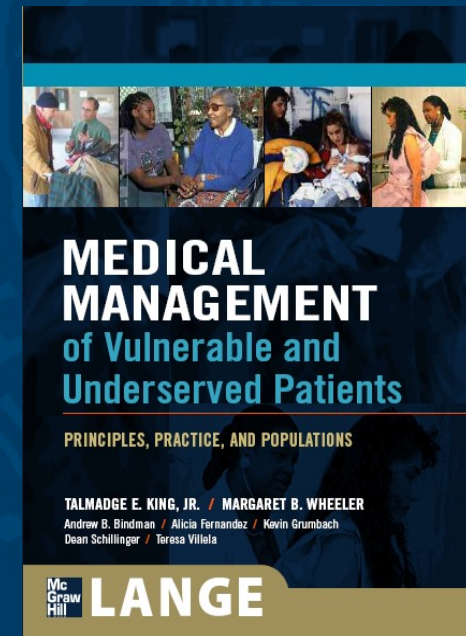
- Ms J is a 57 yo English-speaking Latina, mother of 5, with 3 grandchildren, with high blood pressure, depression, arthritis and insulin-dependent diabetes that is poorly controlled. She presents for the first time after having been hospitalized for 3 days for hypoglycemia (low blood sugar). The hospital service was unable to identify a trigger for the hypoglycemia.
- Question for you is WHY?

Mnemonic Devices Can Make you a Better Clinician!

- My
- Neurons
- Erase
- Memory.
- Only
- Names
- Improve
- Cognition

Common Social Vulnerabilities

Violence
Uninsured
Literacy and Language
Neglect
Economic hardship/food insecurity
Race/ethnic discordance, discrimination
Addiction
Brain disorders, e.g. depression, dementia
Immigrant
Legal status
Isolation/Informal caregiving burden
Transportation problems
Illness Model
Eyes and Ears
Shelter

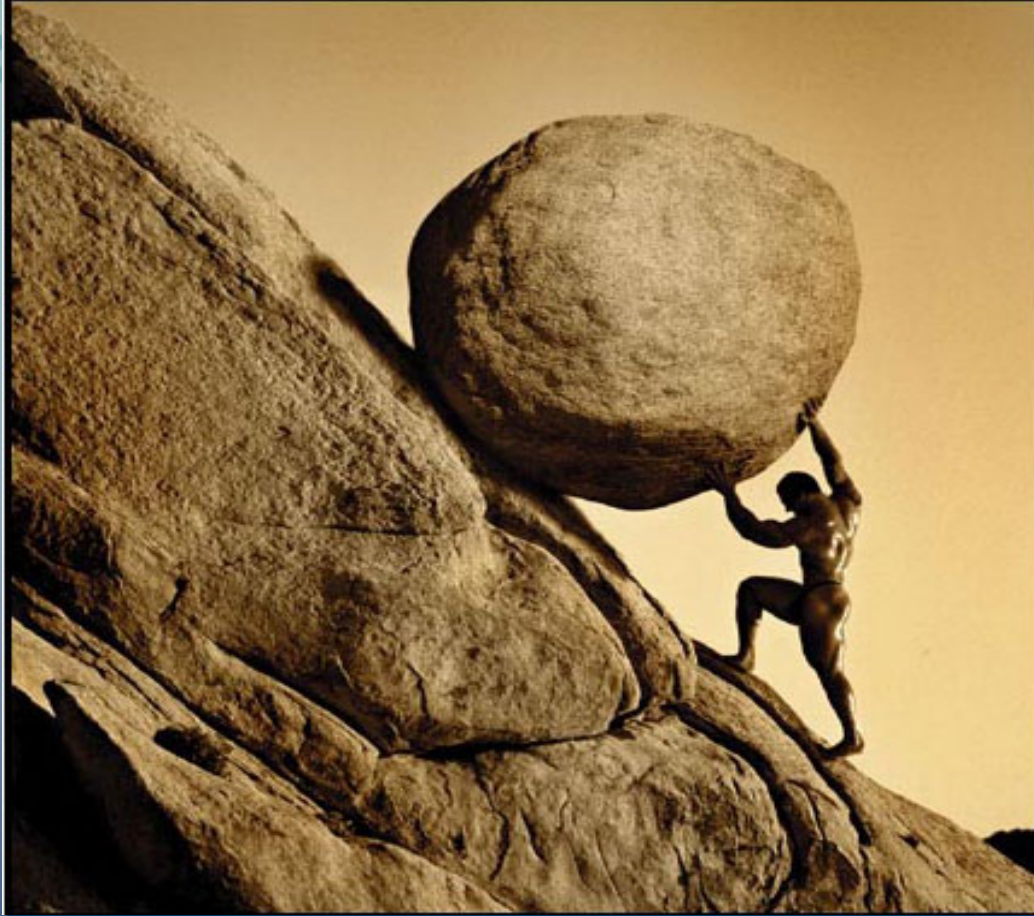


Schillinger 2007

What are We Up Against? Reversing The Inverse Care Law

- “Access to and quality of healthcare is inversely proportional to the needs of the population”

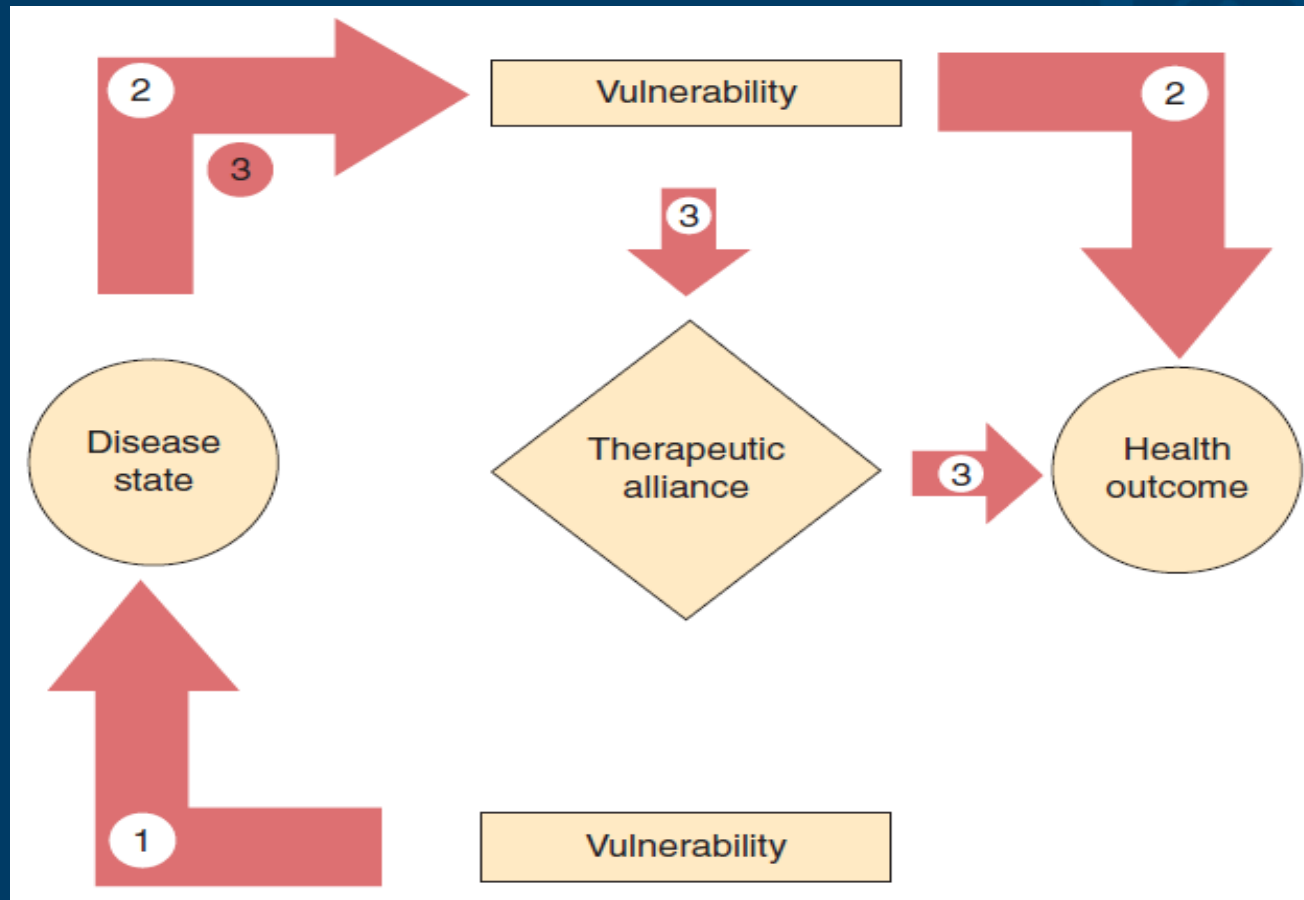
- Tudor-Hart, 1971



“Somebody has to do something, and it's just incredibly pathetic that it has to be us.”

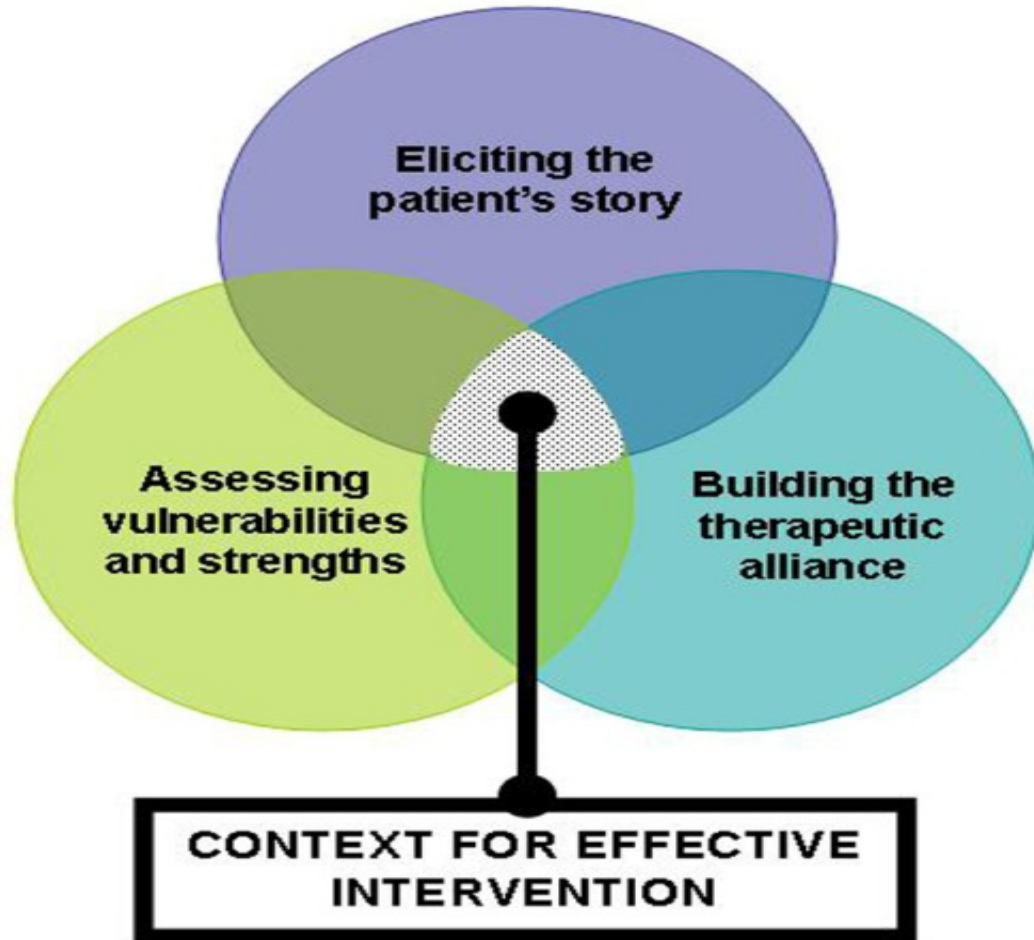
Jerry Garcia

3 Mechanisms Whereby Vulnerability is Associated with Poor Health



Schillinger et al McGraw-Hill 2017

Finding the Sweet Spot for Effective Intervention with Vulnerable Patients



This approach uniformly allows a clinician to navigate the social distance and create the human connection that underlies therapeutic relationships

Eliciting the Patient's Story: Reveals Hidden Treasures that Humanize

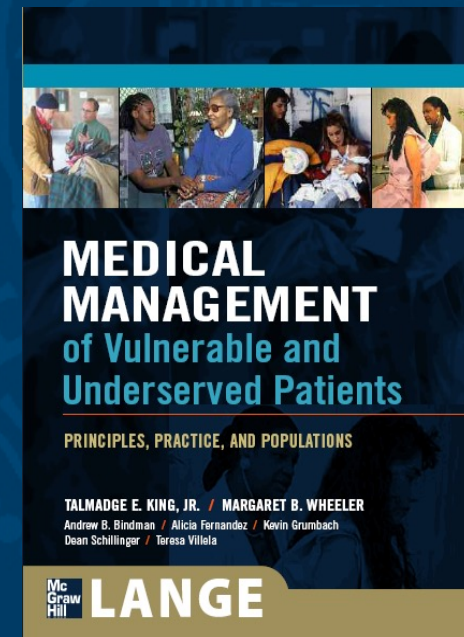


Finding Resilience

- Religion
- Expertise/Employment
- Social support & Network
- Intimates
- Laughter
- Institutions
- Energy & Enthusiam
- Navigate Life's Difficulties
- Cultural Assets
- Entertainment/Enjoyment

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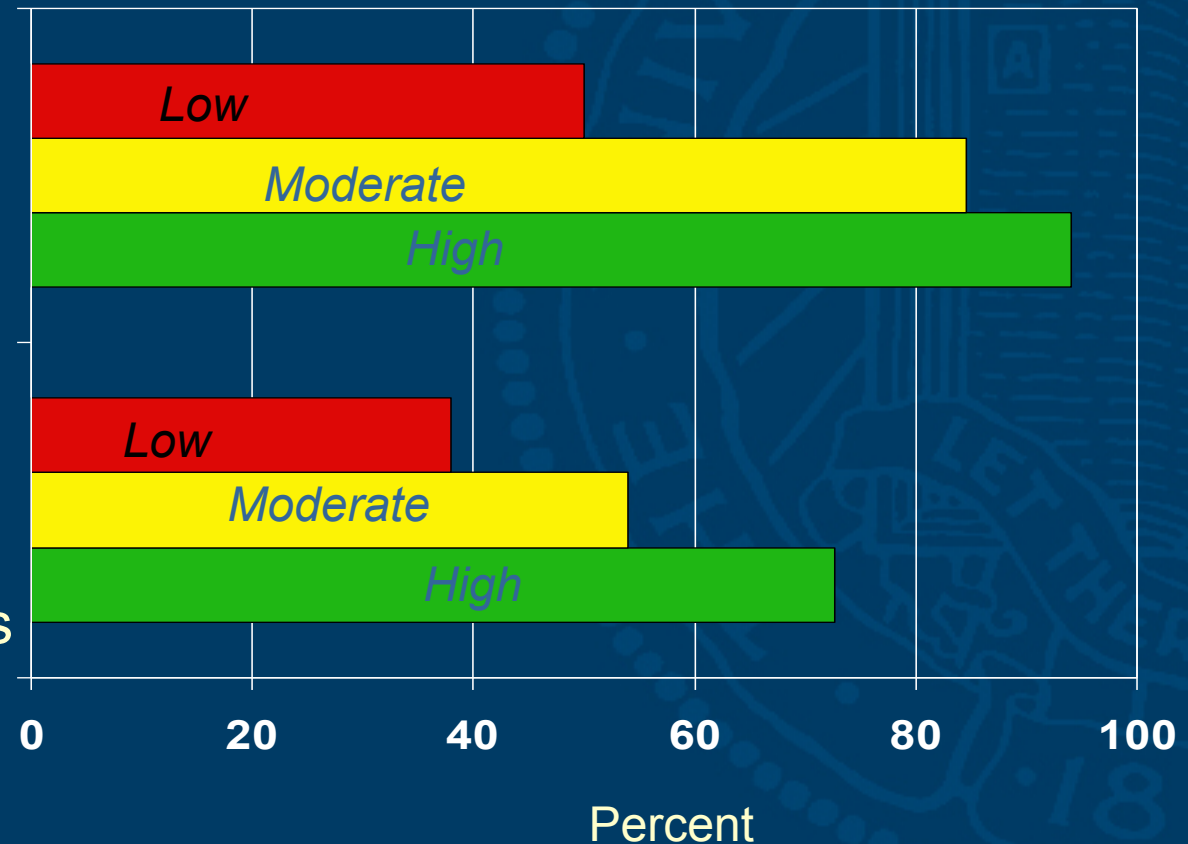
What is Health Literacy?

- “The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make [informed] health decisions.”
- 3 domains: oral (speaking, listening); written (reading, writing); numerical (quantitative)
- ?Web? Patient portals?
- Capacity/Preparedness \leftrightarrow Demand Mismatch

Patients with Diabetes and Low Literacy Less Likely to Know Correct Management

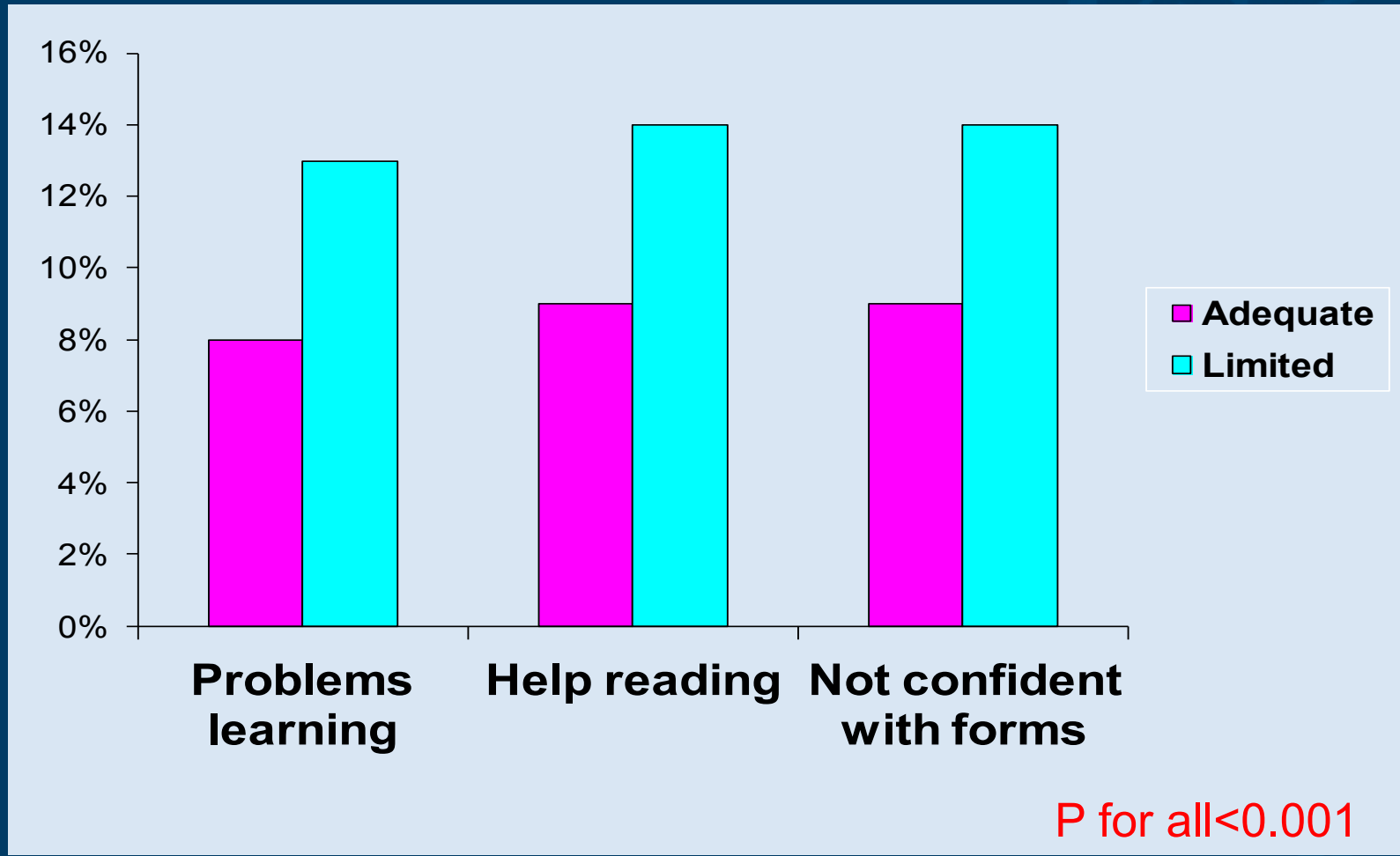
Need to Know:
symptoms of low blood
sugar (hypoglycemia)

Need to Do:
correct action for
hypoglycemic symptoms



*Williams et al., Archive of Internal Medicine, 1998

Limited Health Literacy Patients Experience More Serious Hypoglycemia/year N>14,000



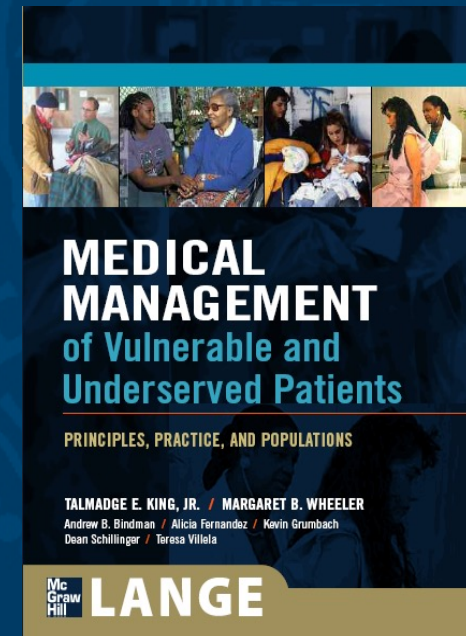
Sarkar, Adler, Schillinger, JGIM 2010

Exemplar Case: Clearly this was Limited Health Literacy, right?

- Ms J is a 57 yo English-speaking Latina, mother of 5, with 3 grandchildren, with high blood pressure, depression, arthritis and insulin-dependent diabetes that is poorly controlled. She presents for the first time after having been hospitalized for 3 days for hypoglycemia (low blood sugar). The hospital service was unable to identify a trigger for the hypoglycemia.

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Schillinger 2007

The Old Face of Hunger

- The uneasy or painful sensation caused by lack of food, or the recurrent and involuntary lack of access to food.



The New Face of Food Insecurity

- The limited or uncertain
 - ◆ availability of nutritionally adequate and safe foods or
 - ◆ ability to acquire acceptable foods in socially acceptable ways



Life Sciences Research Organization

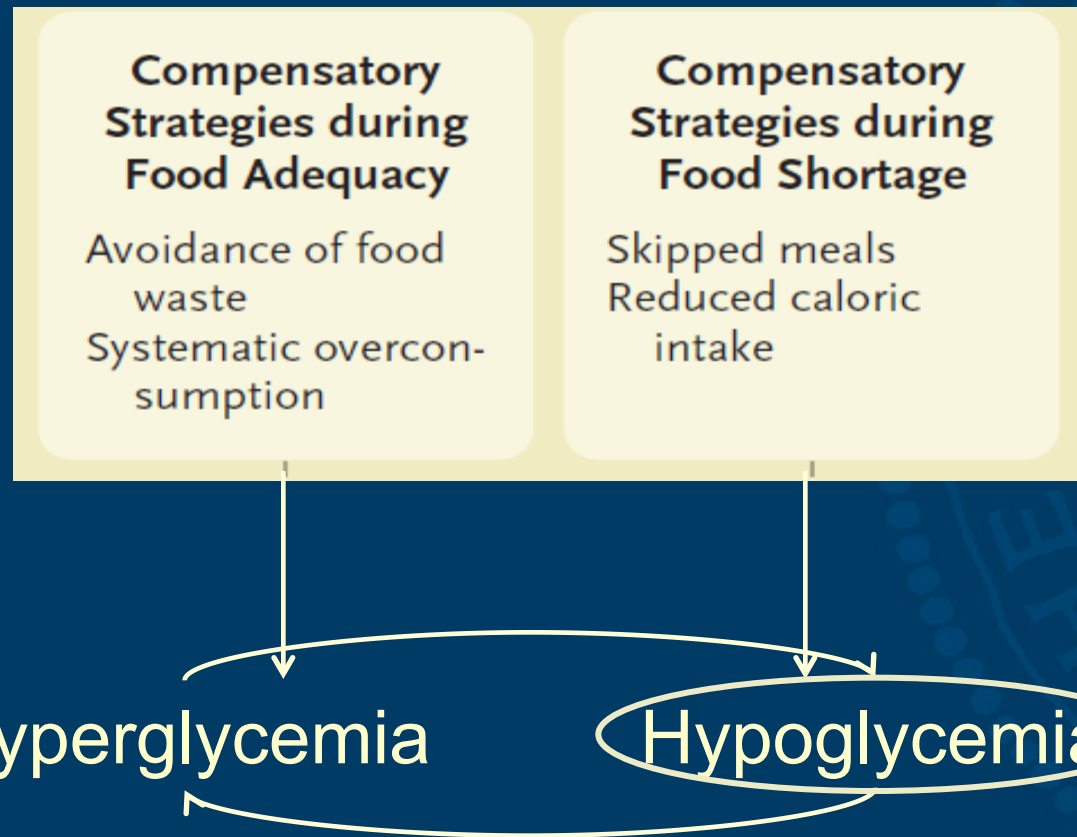
SCHOOL OF MEDICINE • UNIVERSITY OF CALIFORNIA, SAN FRANCISCO

Cycles of Food Adequacy & Inadequacy Wreak Havoc

Compensatory Strategies during Food Adequacy	Compensatory Strategies during Food Shortage
Avoidance of food waste Systematic overconsumption	Skipped meals Reduced caloric intake



Cycles of Food Adequacy & Inadequacy Wreak Havoc



Seligman HK, Schillinger D. N Engl J Med 2010;363:6-9.



The NEW ENGLAND
JOURNAL of MEDICINE

Hypoglycemia & Food Insecurity

- Patients with diabetes in a safety net hospital
 - ◆ 1/3 of those who reported hypoglycemia attributed it to the inability to afford food
- Primary care patients with diabetes at community health centers (**38% food insecure**)
 - ◆ Blood sugar ever gotten too low because you couldn't afford food? (33% FI vs. 5% FS)
 - ◆ Ever been to the ER because your blood sugar was too low? (28% FI vs. 5% FS)

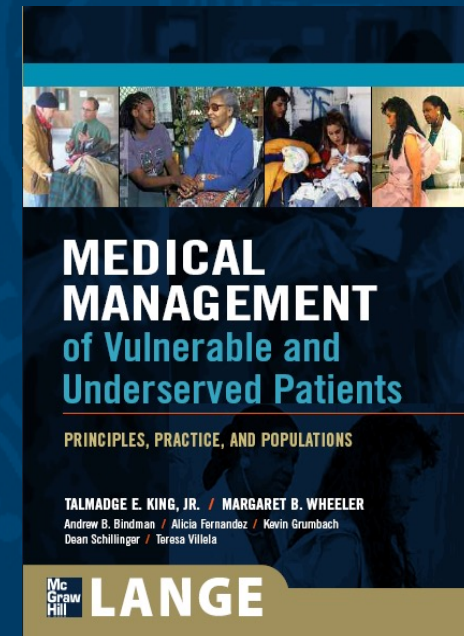
Nelson, JAMA, 1998; Seligman, JHCPU, 2010.

Exemplar Case: Clearly this was Food Insecurity, right?

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Schillinger 2007

What is intimate partner violence (IPV)?

PATTERN of abusive behaviors

- including physical, sexual, verbal, emotional, economic and/or psychological abuse
- Includes interfering with medical care
- used by adults or adolescents
- against current or former intimate partners, and sometimes against other family members
- in ANY intimate relationship: LGBTQ/straight/all gender identities

Exemplar Case: Clearly this was Intimate Partner Violence, right?

- Ms J is a 57 yo English-speaking Latina, mother of 5, with 3 grandchildren, with high blood pressure, depression, arthritis and insulin-dependent diabetes that is poorly controlled. She presents for the first time after having been hospitalized for 3 days for hypoglycemia (low blood sugar). The hospital service was unable to identify a trigger for the hypoglycemia.

Where Have We Been?

- Deconstruct the construct of vulnerable populations
- Present an integrated approach to vulnerable patients
- Demonstrate the importance of eliciting the patient's narrative, assessing for vulnerabilities and identifying points of resilience
- Provide 3 examples of social vulnerabilities & impacts
 - ◆ Limited health literacy
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 - ◆ Intimate Partner Violence

Care of Vulnerable Patients

- “There needs to be a little Don Quixote in all health practitioners... locked in on the mission, undaunted by the doubters and the half-hearted”

- Fitzhugh Mullan, MD



TWO DEAD MEN

A Poem....

One: a refugee from Cuba.

Always in white,

Skin black and smooth,

Fitting the mold from bottom to top:

White leather shoes,

White pants,

White linen shirt,

Crowned with a Havana,

Of course.

The other: tall, lanky,
Happy and old.

A former ball player

In the West Coast Negro League.

Pitched for the Sea Lions

Until he threw his shoulder

Out of its socket,

And could throw no more.

The First: always smiling,
Laughing even.

Gold sparkling from a tooth.
Bejeweled with bling
Like epaulettes
From his favorite pastime:
Reno with Maria

The Second: never sure of his age,
Either 93 or 88,
His Louisiana birth certificate,
Unable to read it,
But he knows it bears false witness.
Keeps his daughter's number safe:
Pearline - on the inside brim
Of his omnipresent
Baseball cap.

UCSF
The Former: still alive

`Cause he quit tobacco 25 years ago
After being filleted open
To plumb his heart.

Proud of his medical survival skills,
And grateful for his doctor.
While smacking his big round belly,
Pregnant with hope and worry.

The Latter: still alive

`Cause he quit smoking 25 years ago
After being told his lungs are vanishing.
Owe my life to my doctor,
So he says and so he believes.
Now chained to an oxygen tank,
Not sure if it's worth it,
Anymore.

Two Brothers,
Resilient,
Living in parallel,
Struggling in parallel,
Full lives behind them.
Now both suddenly dead,
Within days of each other.
Leaving behind their doctor



How can it be
That these two men,
Bedeviled by society
Could become the favorites
Of their doctor?
What can fill the absences,
When one is robbed of one's favorites
And their love is lost?

END

