Empathy:
Assuring Great Care By Focusing on Others

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Objectives

• At the end of today’s session, audience members should be able to:
  o A.) Define Empathy
  o B.) Reflect on their own approaches toward others, determining if they are primarily Others-Centric or Self-Centric
  o C.) Describe two ways they can adjust their personal approaches going forward in order to become more empathetic toward others
What Comes to Mind When You Hear...??
Empathy: What it is not

• Not Pity

• Not Just Being Kind
  o Great Start, however

• Not The Golden Rule:
  o “Do Unto Others…”
Empathy: What it is

• Composed of Two Greek Words:
  o Affection  
  o Feeling  
  \[\text{Compassion}\]

  o Empathy is the ability to share in another's emotions or feelings. It is our ability to imagine what someone is going through that generates empathy.

  o "When people receive empathy, they feel loved and cared about. In other words, they sense our compassion."

Fred Lee: If Disney Ran Your Hospital... 9&1/2 Things You Would do Differently; Second River Healthcare, Bozeman, MT 2004:138
Empathy: What it is

• To “Actually Share the Experience of Another”

• “…Your Capacity to Identify with the Unique Affective State of the Other."

• “… No Judgement or Evaluation of the Person or Feelings Involved”

• “Empathy takes courage, because it means you must be open to the affective experience of another. Often this Experience is Painful.”
Empathy: What it is

- “The capacity to recognize emotions that are being experienced by another…”
  - Required in order to experience accurate sympathy or compassion

- “Understanding the emotional states of other people.”
  - Affective Empathy: Respond with appropriate emotions to another’s perspective or mental state
  - Cognitive Empathy: Understand another’s perspective or mental state.

- Genuine curiosity about others

http://en.wikipedia.org/wiki/Empathy
What Comes to Mind When You Hear...??

“Understand another’s perspective”

“Share the Experience”

↓

“Respond with appropriate emotions”
Empathy: Too Personal?

“To withhold one’s self as a person and to deal with the other person as an object does not have a high probability of being helpful.”

Empathy: Too Personal?

“Professional Involvement is not an alternative to other kinds of involvement such as emotional, esthetic, physical, or intellectual. It is a deliberate synthesis of all of these, a participation of the entire self, using every dimension of the person as a resource…”

If You Could:
Stand In Someone Else’s Shoes…
Hear What They Hear…
See What They See…
Feel What They Feel…

Would You Treat Them Differently?

Courtesy of Cleveland Clinic: https://www.youtube.com/watch?v=cDDWvj_q-o8
Emergency Department Nurse's Perspective

"I don't like how our staff talks about some of the patients in our department. Behind their backs, they make fun of the homeless and the uneducated and the drug addicts and people like that.

I think how we talk about people affects how we treat them."

"...When I see one of these poor souls, I think: there but for the grace of God and two paychecks goes me."
Mother Teresa:

"I see Christ in every person I touch because He said, 'I was hungry, I was thirsty, I was naked, I was sick, I was suffering, I was homeless and you took me in.'

It is as simple as that.

Every time I give a piece of bread, I give it to Him.

That is why we MUST find a hungry one, and a naked one."
How well do we care for others like our loved ones?

What About Our Most Difficult:
Patients?
Students?
Co-workers?
Supervisors?
Neighbors?
Family?
Mother Teresa or Something Less?

How can we — like Mother Teresa — go from the first step of simply trying to "share in another's emotions" and move to the next step of "actively seeking out those..." who desperately need love and care?

Especially, those "difficult individuals"
Patient-Centered Pharmaceutical Care:

“A practice in which the practitioner takes responsibility for a patient’s drug-related needs and is held accountable for this commitment.”

“Patient-Centered Loved-One Care”:

• Take Responsibility For All of Those With Whom We Interact

• Treat Everyone Like They are Our Loved One

• Passionately Seek Out The Most Needy

• Assess All of Their Needs (as best we truly can)

• Purposefully Assure They Are Cared for and Loved

• Hold Ourselves Accountable
Today’s Challenge:

In our Day to Day Practices:
Are Our Patients Sincerely Experiencing Great Care?
...Like Our Loved Ones Would?

Are We Dispensing Care?
...Or Just Medications?
...Meeting Quotas?
In Order to Respond to Others Appropriately

We Must First Become Others-Focused
Where To Start?

• When you ask “How Are You?”
  o Focus on really wanting to know their answer
  o Read that person’s body language
    • When you interact with someone
Next Steps...

- Train Yourself to Intentionally Look for The Most Needy
  - Actively Looking for Those In Most Need
- Avoid Excuses
- Expect “Pain in the Offering”
- Become More Vulnerable
- Value Others Above Yourself
- Become “Legacy-Minded”
  - Thrive at Work!
    - Not Just Survive
  - Perform at a Level Worthy of “Pharmacist of the Year”
Summary

• To Become Others-Focused:
  o Must First Pay Attention to Others
    • Seek opportunities to help others

  o Must Strive to Understand What is Important to Others
    • Patients
    • Physicians
    • Nurses
    • Social Workers
    • Etc.

  HOW CAN YOU HELP THEM
  ACHIEVE THEIR GOALS?

  o Must Care About Their Perspectives
    • Work Hard to Understand Their Point of View

  o Must Strive to Respond Appropriately
    • Avoid Responses that Only Achieve what You Want
Thank You!

May You Richly Bless Others Through Your Practice!

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