

## Empathy Project

### Objectives:

- 1- Understand and apply sensitivity to different cultural, economic, or communication barriers
- 2- Experience challenges associated with chronic diseases
- 3- Identify barriers to medication adherence and persistence and develop strategies to improve these barriers
- 4- Develop effective communication skills with individuals with communication barriers (eg, language, literacy, or hearing impairment)
- 5- List the local resources available for patients
- 6- Self-assess and reflect on the assignment experience through both oral and written communication

### Scenarios:

Scenarios include a mix and match of the following scenarios.

Diseases to be modeled	Type of patients
<ol style="list-style-type: none"><li>1- Diabetes Mellitus</li><li>2- Asthma</li><li>3- Anticoagulation Afib</li><li>4- Anticoagulation DVT</li><li>5- Hypertension 1</li><li>6- Coronary artery disease</li><li>7- Hypothyroidism</li><li>8- Arthritis</li><li>9- Dyslipidemia</li></ol>	<ol style="list-style-type: none"><li>10- Adult</li><li>11- Elderly</li><li>12- Adolescent</li><li>13- Visually impaired</li><li>14- Illiterate</li><li>15- Living outside the city</li><li>16- Pay out of pocket</li><li>17- Blind</li></ol>

### Assessment:

The assignment will be assessed according to the following criteria:

- 1- The **honesty** in journaling the experience. **The student will NOT be evaluated based on the degree of medication adherence.**
- 2- **Attempting at their best to answer the reflection questions**
  - a. What did you **like most** about the simulation exercise?
  - b. What did you **like least** about the simulation exercise?
  - c. Was the integration of the patient simulation exercise a valuable experience during this course? Please write briefly about your experience during the exercise:

- i. How easy/difficult did you find it to follow the prescribed regimen? Did you follow the directions exactly as they were written?
  - ii. What difficulties a person in your case scenario might deal with on a daily basis?
  - iii. What did you learn from the simulation that you think (with your current knowledge in pharmacy) might help a patient with a similar condition? (write any solutions you came up with to solve a problem you faced as a patient during this simulation)
- d. What improvements would you make to the simulation scenario to make it more useful and realistic?

### **3- Completing the pre- and post empathy questionnaire (The Jefferson Scale of Physician Empathy (JSPE) for medical students**

#### **References:**

1. Kimberly S. Plake (2003). A Course on Chronic Illness: Learning the Patient's Perspective. **AJEP**: Volume 67, Issue 1, Article 9.
2. John M. Lonie, Rola Alemam, Conrad Dhing, and David Mihm (2005). Assessing Pharmacy Student Self-Reported Empathic Tendencies. **AJEP**: Volume 69, Issue 2, Article 29.
3. Renee Ahrens Thomas (2006). Developing Structured-Learning Exercises for a Community Advanced Pharmacy Practice Experience. **AJPE**: Volume 70, Issue 1, Article 23.
4. Judy T. Chen, Joseph LaLopa, and Devra K. Dang (2008). Impact of *Patient Empathy Modeling* on Pharmacy Students Caring for the Underserved. **AJEP**: Volume 72, Issue 2, Article 40
5. Candice L. Garwood, Mirjon Bishja, and Maureen A. Smythe (2010). An Innovative Elective Course in Anticoagulation Management. **AJEP**: Volume 74, Issue 10, Article 187
6. Nancy Fjortoft, Lon J. Van Winkle, and Mohammadreza Hojat (2011). Measuring Empathy in Pharmacy Students. **AJEP**: Volume 75, Issue 6, Article 109

Student Name:.....

Lab Day: Sunday

Wednesday

**The Jefferson Scale of Physician Empathy (JSPE) For Medical Students (Pre- survey)**

Item	Strongly agree	Agree	Agree somewhat	Undecided	Disagree somewhat	Disagree	Strongly disagree
1- Health care providers' understanding of their patients' feelings and the feelings of their patients' families does not influence treatment outcomes.							
2- Patients feel better when their health care providers understand their feelings.							
3- It is difficult for a health care provider to view things from patients' perspectives.							
4- Understanding body language is as important as verbal communication in health care provider-patient relationships.							
5- A health care provider's sense of humor contributes to a better clinical outcome.							
6- Because people are different, it is difficult to see things from patients' perspectives.							
7- Attention to patients' emotions is not important in patient interview.							
8- Attentiveness of patients' personal experiences does not influence treatment outcomes.							
9- Health care providers should try to stand in their patients' shoes when providing care to them.							
10- Patients value a health care provider's understanding of their feelings which is therapeutic in its own right.							
11- Patients' illnesses can be cured only by targeted treatment; therefore, health care providers' emotional ties with their patients do not have a significant influence in treatment outcomes.							
12- Asking patients about what is happening in their personal lives is not helpful in understanding their physical complaints.							
13- Health care providers should try to understand what is going on in their patients' minds by paying attention to their non-verbal cues and body language.							
14- I believe that emotion has no place in the treatment of medical illness.							
15- Empathy is a therapeutic skill without which a health care providers' success is limited.							
16- Health care providers' understanding of the emotional status of their patients, as well as that of their families is one important component of the health care provider – patient relationship.							
17- Health care providers should try to think like their patients in order to render better care.							
18- Health care providers should not allow themselves to be influenced by strong personal bonds between patients and their family members.							
19- I do not enjoy reading non-medical literature or the arts.							
20- I believe that empathy is an important factor in patients' treatment.							

Student Name:.....

Lab Day: Sunday

Wednesday

**The Jefferson Scale of Physician Empathy (JSPE) For medical students (Post- survey)**

Item	Strongly agree	Agree	Agree somewhat	Undecided	Disagree somewhat	Disagree	Strongly disagree
1- Health care providers' understanding of their patients' feelings and the feelings of their patients' families does not influence treatment outcomes.							
2- Patients feel better when their health care providers understand their feelings.							
3- It is difficult for a health care provider to view things from patients' perspectives.							
4- Understanding body language is as important as verbal communication in health care provider-patient relationships.							
5- A health care provider's sense of humor contributes to a better clinical outcome.							
6- Because people are different, it is difficult to see things from patients' perspectives.							
7- Attention to patients' emotions is not important in patient interview.							
8- Attentiveness of patients' personal experiences does not influence treatment outcomes.							
9- Health care providers should try to stand in their patients' shoes when providing care to them.							
10- Patients value a health care provider's understanding of their feelings which is therapeutic in its own right.							
11- Patients' illnesses can be cured only by targeted treatment; therefore, health care providers' emotional ties with their patients do not have a significant influence in treatment outcomes.							
12- Asking patients about what is happening in their personal lives is not helpful in understanding their physical complaints.							
13- Health care providers should try to understand what is going on in their patients' minds by paying attention to their non-verbal cues and body language.							
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18- Health care providers should not allow themselves to be influenced by strong personal bonds between patients and their family members.							
19- I do not enjoy reading non-medical literature or the arts.							
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