EMPATHETICS MODULE 1 INTRODUCTION: Small Group Discussion Questions

Instructions for Student Facilitator:

- 1) Choose 2-3 questions to discuss OR Make up your own discussion question
- 2) Write down key points from the discussion of each question on the accompanying sheet
- 3) Post key points on Canvas Discussion Board

DISCUSSION QUESTIONS

- a) How are the components of empathy cognitive, emotional, moral, behavioral implicated in a clinical context? Give examples
- b) What does self-awareness have to do with empathy? Why is physician self-awareness important in a clinical encounter?
- c) Is empathy the same as giving the patient everything they ask for? Why or why not?
- d) From a certain perspective, it seems counter-intuitive that empathy could ameliorate or protect against physician burn-out. Why do you think understanding and feeling something about the patient's situation doesn't lead to burn-out?
- e) What does the acronym EMPATHY stand for (Eye contact; Muscles/facial expression; Posture/body language; Affect (patient's); Tone of voice; Hearing/listening (whole person); Your (emotional) response feelings)? Why is each of these elements important?
- f) What was one thing you learned from the video role-plays? Were there any interactions in which you disagreed with the way the physician handled the situation? What might you have done instead?
- g) What are the Four Habits? (Invest in the beginning of the encounter; Elicit pt perspective show curiosity; Demonstrate empathy; Invest in the ending). Give examples of how you might demonstrate each of these in a clinical situation.
- h) How do you go about managing your own emotions in a clinical setting? (Awareness; Managing avoid automatic responses take a breath, step out, refocus on pt perspective)
- i) What are some barriers to empathy? (Time pressures; Patients exerting emotional pressure anger, attacking, manipulating, criticizing; non-adherent)? How might you deal with them?
- j) What are some important points about the neurobiology of empathy? (emotional threats trigger fight/flight; our brains remember threats, so hard to start over with upsetting pt; activity of mirror neurons; prefrontal cortex helps regulate limbic responses; shared neural circuits – importance of touch)
- k) What are some common emotions expressed through facial expressions (anger, fear, disgust, contempt, sadness/grief, happiness, boredom)? What have you noticed about facial expressions of patients/doctors you've observed?