

Practice Bulletin:

Conversations with Families to Recognize Needs



COVID-19 is rapidly changing the circumstances of families with young children, creating new health-related social needs for families and communities to address. Providers, here's how you can help.

Why the Conversation Matters:

More families need more help to manage everyday aspects of living as a result of the COVID-19 pandemic. Even in good times, social factors affect how families access health care and even how healthy they are. Social factors that influence health include the type and stability of work, income, housing quality and stability, food security, mental health, and parenting support. We know how important it is for health providers to address these health-related social needs, but providers hesitate to ask families about them. They worry about the time it requires, about not knowing where they can refer families for help, and about potentially uncovering problems they cannot resolve.^{1,2} Providers believe that asking questions on sensitive topics without providing a solution could harm their relationships with their patients.³

We know that strong relationships with patients are critical. However, providers underestimate the power of empathetic conversations—even brief ones—for building trusting relationships with families.⁴ Patient-centered conversations that take no more time than a

standard medical interview⁵ can offer relief to families experiencing stress. These conversations lead to increased patient satisfaction and better adherence to treatment.⁶ Providers report that when they play a role in addressing social needs and can refer to a resource, it eases their stress and allows more time for focusing on medical issues.⁷

In COVID-19's fallout, providers who do not ask about family stresses may place families at greater risk. It is easy to miss family circumstances that can seriously impact child health, such as lack of food, parental depression or anxiety, or insufficient resources for medications or formula. In the next few months, providers will become a primary resource for patients seeking help or presenting with health-related social needs for the first time. By talking with families about their circumstances, providers can help them feel connected and supported. A provider can be the person who connects them to the help they need to manage through these challenging times.

How to Have the Conversation:

Although anticipating these conversations can be uncomfortable, providers who develop strategies for asking families about health-related social needs also report being able to help families.^{1,11,12} Providers can quickly integrate strategies¹³ for having sensitive conversations (as outlined below) to create a connection. Keep in mind that families feel seen and

heard when providers ask questions about their needs and listen when families talk about their challenges.^{6,9} When providers are sensitive to social care needs and take time to have a conversation about them, families feel that their providers care about them.¹⁴ This feeling is an important buffer for stress, promoting resilience, and improving relationships with healthcare providers.^{15,16}



RECOMMENDATIONS FOR PROVIDERS

1.

BE PREPARED

Consider how you will introduce the topic or respond to questions about social care needs. Consult with a colleague or a clinic resource such as behavioral healthcare staff about strategies. Identify some tools (below) and [services in your area](#) that can help connect families with support.

2.

GIVE THEM YOUR UNDIVIDED ATTENTION

Putting down papers, turning away from the computer, and making eye contact communicates to patients that this conversation is important. When working with an interpreter, remember to make eye contact with the patient and maintain focus on them during translation.

3.

START THE CONVERSATION, IF THEY HAVEN'T ALREADY

Starting with an open-ended question may help the conversation begin without fear of judgment. Asking permission helps families feel in control of the boundaries of the conversation.
"How are things at home?"
"Do you mind if we talk about. . ."

4.

ACKNOWLEDGE THEIR FEELINGS

Reflecting back what the patients say helps them feel understood.
"It seems like you felt. . ."
"That must have been frustrating. . ."

5.

ASK THEM TO ELABORATE

Patients will often wait for an invitation to continue talking about their feelings. You can encourage patients to continue in order to learn more about their needs. Allow for silent pauses and let patients collect their thoughts before asking another question or making a comment.
"Would you be willing to tell me more about. . ."

6.

NORMALIZE AND DESTIGMATIZE THEIR CHALLENGES

Let them know they are not alone.
"A lot of people are struggling with this right now."
"Many people find it hard to talk about this. . ."

7.

EXPRESS SHARED VALUES

Patients will reveal their feelings, priorities, and values as they describe their concerns. You can support them by recognizing the values you share.
"That doesn't sound fair. I would feel angry too. . ."
"That must be hard. Anyone would feel that way."

8.

EMPHASIZE FAMILY STRENGTHS

Ask them if they have someone (family, friends, faith, or community) in their life to support them, and recognize their resilience in the face of these challenges.
"What do you do or who do you turn to when you need some support?"
"Despite everything you've been facing, you're still doing a great job taking care of your family. . ."

9.

PROVIDE CLOSURE

Let patients know that you appreciate them sharing and your knowledge of their experience can help you better care for them. If possible, provide a next step and keep the conversation open for future contact.
"I appreciate your willingness to talk with me about your experiences. . ."
"If it's alright with you, we can keep checking in about this when you come in for your next visit."

10.

REFLECT ON THE CONVERSATION

If you take time to think about how the conversation went, you can recognize how you connected with the patient and what you might do differently next time. These conversations will get easier with practice, and reflecting on the meaningful connection you made with the patient will help you remember that you are doing something to help.

What Matters Most

Even if you're limited in solving the problems that families reveal, you can still offer respect and dignity, making them feel accepted and understood by someone in a position of authority.^{17,18} This alone may increase the chance that the family will continue to seek help despite some families reporting negative experiences with social care or health care systems in the past.^{10,15} These experiences may then increase the likelihood that families will eventually receive the help they need.^{4,15,19}

Tools for Supporting Families

The [Common Factors Intervention \(HELP model\)](#). The American Academy of Pediatrics (AAP) offers this model to promote interactions with families that address behavioral and emotional concerns in primary care.

The [Clear Toolkit](#). A clinical decision aid developed to help physicians, nurses and other allied health workers (e.g. midwives, community health workers, etc.) assess different aspects of patient vulnerability in a contextually appropriate and caring way and easily identify key referral resources in their local area.

The [STEPS forward module on Empathetic Listening](#). The American Medical Association offers this CME course to improve skills for listening and communicating empathy in conversations with patients.

The [EveryONE Project Neighborhood Navigator](#). The American Academy of Family Physicians' EveryONE project promotes health equity providing tools for assessing and referring patients for social needs. The Neighborhood Navigator is an interactive tool intended to connect patients with local resources and programs by zip code.

[COVID-19 Family Resources](#). The AAP recommends articles for parents in response to the pandemic, in addition to general information for parents on [HealthyChildren.org](#). Many articles are available in both English and Spanish.

The AAP [STAR center](#) offers technical assistance including toolkits for screening for a variety of social care needs.

The [Bright Futures website](#) offer tools and guidelines for building systems for prevention and health promotion in the medical home.

Common Community Resources

2-1-1. Every state has a 2-1-1 call center that can help families locate resources in their area for food assistance, housing assistance, economic support, and crisis resources. 2-1-1 is a good resource for questions and information related to immigration. It is also equipped to support families experiencing domestic abuse.

Family Resource Centers (FRC). Many states have a network of community-based Family Resource Centers that can be important sources of support. FRCs typically offer or can help families access services such as parenting skills training, job training, substance abuse prevention services, mental health services, housing support, crisis intervention services, literacy programs, and concrete supports such as food and clothing banks.

Help Me Grow (HMG). Currently with 34 HMG network affiliates, HMG houses centralized information about resources centered on early childhood systems and supports. HMG affiliates maintain a current directory of available community services. Families can be referred to HMG, call HMG directly, and, in many locations, complete application forms online.

United Way. Located in every state and many communities, United Way operates as a community-based nonprofit and coordinates with many local partners that provide direct assistance to families. United Way typically focuses on education, financial stability, and health.

[Learn about Chapin Hall's evaluation of innovations designed to promote screening for contributors to toxic stress during pediatric well-child visits and connect families to early childhood and community service providers.](#)

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For more information about Chapin Hall's work on mitigating toxic stress through interventions at pediatric clinics, contact [Julie McCrae](#).