

Fundamentals for Establishing Patient-Centered Care for Deaf and Hard of Hearing Children

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Background

Researchers have examined the language and communication needs of the Deaf and Hard-of-Hearing community across various fields of study. However, the application of the Patient-Centered Care Model (PCC) to address the communication needs of the Deaf and Hard of Hearing community in medical settings is understudied. Some providers are unaware of the unique modes of communication each patient may utilize. According to Yet et al. (2022), there are various modes of communication that deaf and hard-of-hearing individuals may use during a medical appointment, such as lip reading, writing, help from a family member, in-person interpreter, virtual interpreter(VRI), or communicating with providers directly. These unique modes of communication need to be considered at the beginning of the patient's journey post Identification.

Figure 1



Epstein MR and Street RL. Patient-centered communication in cancer care: Promoting healing and reducing suffering. NCI, NIH publication #07-6225, Bethesda MD, 2007
<http://www.outcomes.cancer.gov/areas/pcc/communication>

Purpose/ Objective

The purpose of this literary review is to identify gaps in research on how the Patient-Centered Care Model can improve health outcomes for the Deaf and Hard of Hearing community.

Definitions

- Patient-Centered Care Model(PCC): Focuses on patients playing an active role in their medical care. In Figure 1, the model was used for cancer patients, but this model can also be applied to deaf and hard of hearing patients to improve their experiences in the medical setting.
- Information Exchange: Making sure the information is communicated correctly and is understood. For example, how is the information being communicated to patients, and how well do they understand it?
- Fostering Healing Relationships: Establishing a good relationship between doctors and patients will lead to better health outcomes.
- Patient Autonomy: Patient's ability to make decisions during a medical appointment, such as consent or understanding what is being planned.
- Deaf Nod : A cultural term for when a Deaf person nods along during a conversation when they may not understand what is being communicated. Hearing people often assume the "Deaf Nod" as agreeing, leading to medical providers assuming a patient consented to a procedure or treatment.

Methods

- Multiple Google Scholar searches were conducted to review articles.
- Some of the key search terms were Patient-Center Care, Deaf and Hard of Hearing doctor-to-patient relationships, Deaf Nod, Audisum, and Deaf and Paternalism.
- A total of 62 articles were found and analyzed based on the Patient-Center Care Model
- 26 out of the 62 articles were applied to the Patient-Center Care Model

Key Findings

- Lack of Effective Information Exchange negatively affects health outcomes for deaf and hard-of-hearing patients.
- Deaf or hard-of-hearing individuals may not understand what is being communicated and may utilize the "Deaf Nod"
- Communication barriers may affect the relationships between the patients and their doctors.
- Lack of appropriate accommodations may negatively affect the relationship between patients and their medical providers.
- Parents being used as interpreters to facilitate communication affects the relationships between patients and medical providers. Providers may unintentionally speak only with the parent, ignoring the deaf and hard-of-hearing patients.
- Lack of Patient Autonomy affects the patient's health outcomes.
- Deaf and hard-of-hearing patients may be treated paternally, meaning the providers may make decisions for them without consulting the patient.

Conclusion

The Patient-Centered Care Model and its relationship to effective communication with deaf and hard-of-hearing patients have not been thoroughly researched. Therefore, it is essential to note the need for implementing the Patient-Centered Care Model during medical appointments. Utilizing the Patient-Centered Care Model for deaf and hard-of-hearing patients will improve health outcomes.

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