

Build Trust and Rapport:

Improving the Health of Black Men

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No Disclosures

Learning Objectives

- Recognize the contributing factors to the lower life expectancy of Black men
- Describe the role of the clinically practicing PA in addressing the health of their Black male patients
- Apply strategies for effective engagement and rapport building with Black male patients



Images source: Envato Elements

More likely to.....

- Follow up
- Take their medications
- Agree to recommended labs/test
- Follow preventative health advice



Image source: Envato elements

3.5%

of PAs are Black

The secret ingredients...

- Rapport
- Trust



Definitions

- **Rapport**- a relationship characterized by agreement, mutual understanding, or empathy that makes communication possible or easy
- **Trust**- assured reliance on the character, ability, strength, or truth of someone or something

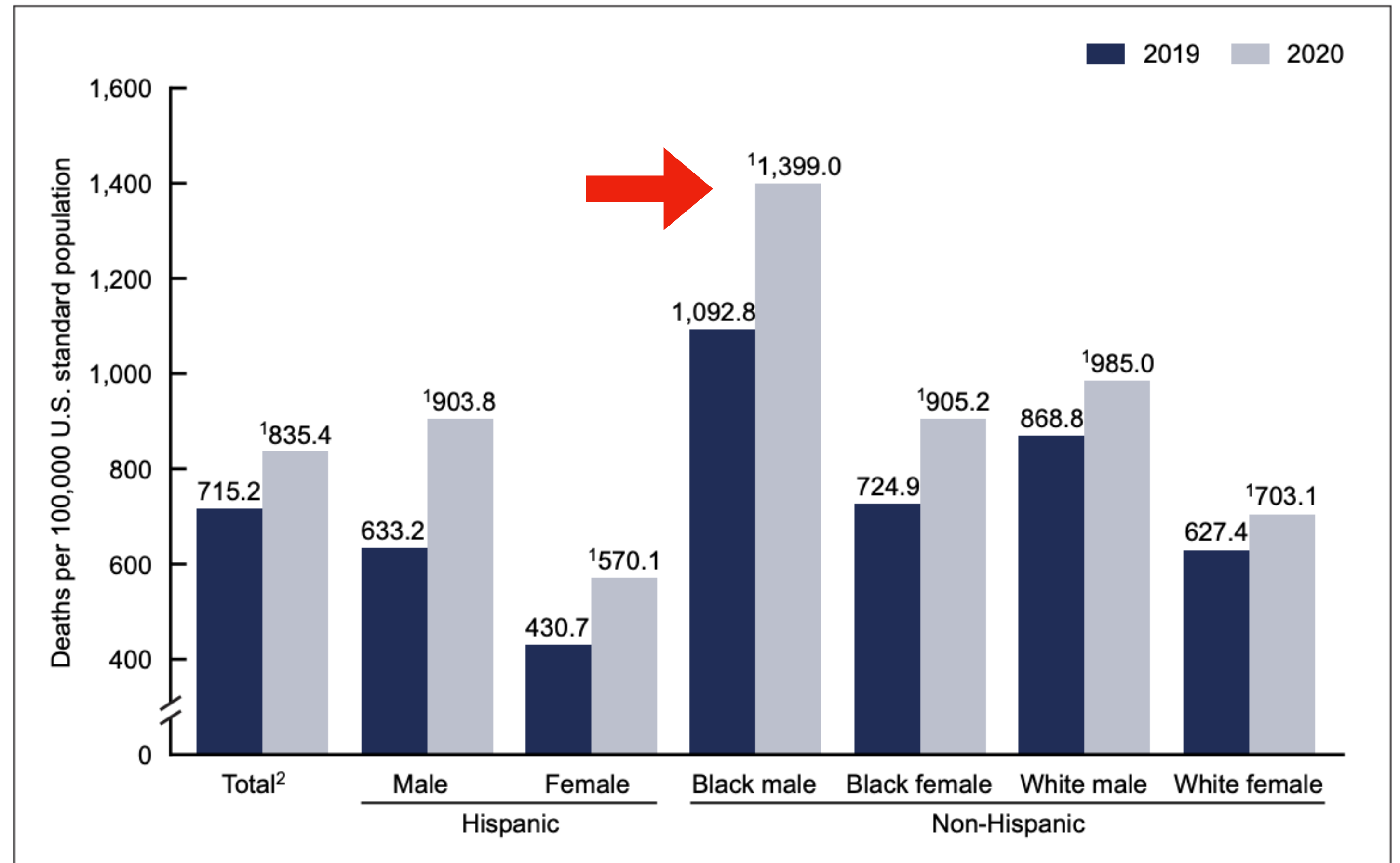


Images source: Envato Elements

For healthcare providers, building rapport and trust is absolutely necessary for better patient outcomes

Black Men's Health Statistics

Figure 2. Age-adjusted death rates, by sex and race and ethnicity: United States, 2019 and 2020



¹Statistically significant increase in age-adjusted death rate from 2019 to 2020 ($p < 0.05$).

²Includes races and origins not shown separately.

NOTES: Race groups are single race. Data table for Figure 2 includes the number of deaths. Access data table for Figure 2 at:

<https://www.cdc.gov/nchs/data/databriefs/db427-tables.pdf#2>.


SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.

- Highest mortality rate for any major demographic group
- Die nearly 5 years earlier than white men and live 7 years less than women of all races (*Gilbert et al. 2016*)

Black Men's Health Statistics

- Are more likely to have undiagnosed or poorly managed conditions
- Suffer from higher rates of heart disease, diabetes, prostate cancer and obesity
- Homicide is one of the leading causes of death

Non-Hispanic Black¹, Male, All ages²

Rank	Disease	Percent
1)	Heart Disease	24.1%
2)	Cancer	19.7%
3)	Alzheimer's Disease	7.9%
4)	Stroke	5.0%
5) 	Homicide	4.5%
6)	Diabetes	4.4%
7)	Chronic Lower Respiratory Disease	3.3%
8)	Kidney Disease	2.7%
9) ³	Septicemia	1.7%
10) ³	Hypertension	1.7%

Centers for Disease Control and Prevention. Leading Causes of Death-Males-Non-Hispanic Black-United States, 2018. www.cdc.gov/minorityhealth/lcod/men/2018/nonhispanic-black/index.htm

Why are these statistics so bad?

Contributing Factors

- High unemployment rates
- Lack of education
- Environmental
- Lack of access to healthcare
- Racial discrimination

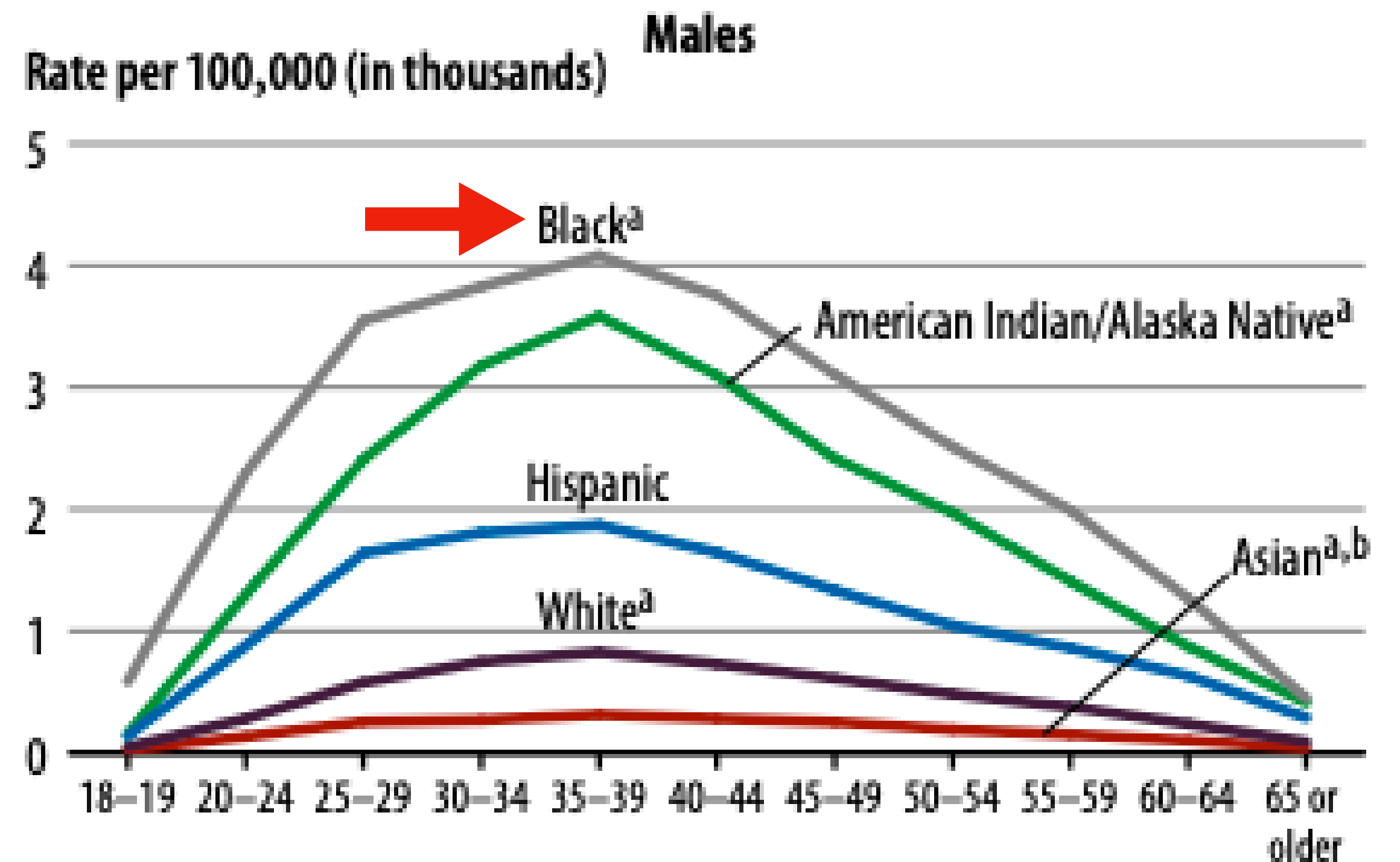


Image Source: Envato Elements

Contributing Factors

- High incarceration rates
- Black men = 7% of the US population and represent nearly 40% of all prisoners
- Felony Record= employment barrier

Imprisonment rates of U.S. residents, based on sentenced prisoners under the jurisdictions of state and federal correctional authorities, by demographic characteristics, December 31, 2020



Source: Bureau of Justice Statistics, Federal Justice Statistics Program, 2020 (preliminary), National Corrections Reporting Program, 2019, National Prisoner Statistics, 2020, and Survey of Prison Inmates, 2016; and U.S. Census Bureau, postcensal resident population estimates for January 1 of the following calendar year.

Institutional Barriers

- Historic medical mistreatment
- Race based clinical practices and ideology (*Reddick.2021*)
- Leads to lack of rapport with healthcare providers (*Kennedy. 2007*)



Ref: National Archives: Participants of the Tuskegee Syphilis Study, ca.1940-72 (NAID 956091)

Patient/Provider Barriers

- Lack of trust
- Being judged
- Not being taken seriously



Black men are 50% less likely to have seen a healthcare provider within the past year, despite having health insurance

What can PAs do?

- Be aware of the social determinants of health unique to Black men
- Challenge personal bias and beliefs about race
- Try to understand the values that are important to Black men i.e:
 - Spirituality, ethnic identity, respectability, reputation (Griffith et al. 2021)



Engagement Strategies

- 1. Ask engaging question**
- 2. Actively listen**
- 3. Take time to explain**



Engagement Strategies

1. Ask engaging question

- “What values are most important to you?”
- “What are some of your personal goals?”
- “How does your health relate to your values and goals?”



Engagement Strategies

2. Actively listen

- Good eye contact
- Open posture
- Avoid distractions



Engagement Strategies

3. Take time to explain

- Slow down!
- Avoid complex jargon
- Confirm patient's understanding



Summary

- Black men face unique health challenges
- Social determinants of health are major contributing factors
- Building rapport and trust can lead to better patient/provider relationships and better health outcomes
- PAs can build rapport and trust by:
 1. Asking engaging questions
 2. Actively listening
 3. Taking the time to explain



Thank You!

References

- Blugis, S. (2022, January 26) New data: PA students have diverse backgrounds, life experiences. AAPA. Retrieved January 30, 2023, from <https://www.aapa.org/news-central/2022/01/new-data-pa-students-have-diverse-backgrounds-life-experiences/>
- Centers for Disease Control and Prevention. Leading Causes of Death-Males-Non-Hispanic Black-United States, 2018. www.cdc.gov/minorityhealth/lcod/men/2018/nonhispanic-black/index.htm Gadson SL. 2006. The third world health status of black American males. *Journal of the National Medical Association*. 98:488-91
- Gilbert, K. L., Ray, R., Siddiqi, A., Shetty, S., Baker, E. A., Elder, K., & Griffith, D. M. (2016). Visible and Invisible Trends in Black Men's Health: Pitfalls and Promises for Addressing Racial, Ethnic, and Gender Inequities in Health. *Annual review of public health*, 37, 295–311. <https://doi.org/10.1146/annurev-publhealth-032315-021556>
- Griffith, D. M., Pennings, J. S., & Jaeger, E. C. (2021). African American Manhood and self-rated health: What demographic characteristics, health conditions, and aspects of manhood matter?. *Psychology of men & masculinity*, 22(2), 250–264. <https://doi.org/10.1037/men0000343>
- Hammond, W. P., Matthews, D., Mohottige, D., Agyemang, A., & Corbie-Smith, G. (2010). Masculinity, medical mistrust, and preventive health services delays among community-dwelling African-American men. *Journal of general internal medicine*, 25(12), 1300–1308. <https://doi.org/10.1007/s11606-010-1481-z>
- Kennedy, B. R., Mathis, C. C., & Woods, A. K. (2007). African Americans and their distrust of the health care system: healthcare for diverse populations. *Journal of cultural diversity*, 14(2), 56–60.
- Laurencin, C. T., & Murray, M. (2017). An American Crisis: the Lack of Black Men in Medicine. *Journal of racial and ethnic health disparities*, 4(3), 317–321. <https://doi.org/10.1007/s40615-017-0380-y>
- Leach M. J. (2005). Rapport: a key to treatment success. *Complementary therapies in clinical practice*, 11(4), 262–265. <https://doi.org/10.1016/j.ctcp.2005.05.005>

References

- Merriam-Webster. (n.d.) rapport. In *Merriam-Webster.com dictionary*. Retrieved January 3, 2023, from <https://www.merriam-webster.com/dictionary/rapport>
- Merriam-Webster. (n.d.) trust. In *Merriam-Webster.com dictionary*. Retrieved January 3, 2023, from <https://www.merriam-webster.com/dictionary/trust>
- Murphy SL, Kochanek KD, Xu JQ, Arias E. Mortality in the United States, 2020. NCHS Data Brief, no 427. Hyattsville, MD: National Center for Health Statistics. 2021. DOI: <https://dx.doi.org/10.15620/cdc:112079>.
- Plowden, K. O., John, W., Vasquez, E., & Kimani, J. (2006). Reaching African American men: a qualitative analysis. *Journal of community health nursing*, 23(3), 147–158. https://doi.org/10.1207/s15327655jchn2303_2
- Powell, W., Richmond, J., Mohottige, D., Yen, I., Joslyn, A., & Corbie-Smith, G. (2019). Medical Mistrust, Racism, and Delays in Preventive Health Screening Among African-American Men. *Behavioral medicine (Washington, D.C.)*, 45(2), 102–117. <https://doi.org/10.1080/08964289.2019.1585327>
- Ravenell, J. E., Whitaker, E. E., & Johnson, W. E., Jr (2008). According to him: barriers to healthcare among African-American men. *Journal of the National Medical Association*, 100(10), 1153–1160. [https://doi.org/10.1016/s0027-9684\(15\)31479-6](https://doi.org/10.1016/s0027-9684(15)31479-6)
- Reddick B. (2021). Fallacies and Dangers of Practicing Race-Based Medicine. *American family physician*, 104(2), 122–123.
- Shikany, J. M., Schoenberger, Y. M., Konety, B. R., & Vickers, S. M. (2018). African American Men's Health: Research, Practice, and Policy. *American journal of preventive medicine*, 55(5 Suppl 1), S1–S4. <https://doi.org/10.1016/j.amepre.2018.07.011>