

Grand Stewards of Trust in Health Care: Walk with Me

“ Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around. —LEO BUSCAGLIA



When I was a kid, I had a friend named Anthony who played the cello. We walked home from school together every day. About three days a week, he would carry his cello to school. Keep in mind that a cello is a heavy lift for 4th and 5th graders. I asked him more than once why he didn't pick the violin like I did. Anthony lived about four blocks further away from the school than I did, so he would ask me if I would help him carry it to the end of my block. Anthony and I come from different culture backgrounds and we are different races, but on our walks together we would talk about all of the things that were important to 10-year-old boys in the 1980s. Some days he'd ask me to just walk with him to the end of the block whether he had his cello or not, just to continue the conversation. As we got older, our conversations became more complex and a "walk to the end of the block" became our term if we had something important to talk about. Some 30 years down the road, and with families of our own, we still "walk to the end of the block" together.

How does this relate to community health? Community health care is a neighborhood-to-neighborhood, block-to-block endeavor. The blocks in our neighborhoods are filled with people who have amazing stories of triumph and defeat they would like to share—however many times—that they don't believe anyone is listening to or paying attention. There is much work to be done to reverse this. As health care professionals, it often seems that we are going out of our way to let those in our neighborhoods know we care. I'm not taking anything away from

those worthwhile and impactful efforts. My challenge is this—are they convinced we are doing it for them and their well-being, or for a positive patient experience score? Important food for thought.

The first step towards being a Grand Steward of Trust is to **BE PRESENT**, to exercise Empathic Intentionality. Empathic Intentionality is coming alongside someone to walk the journey with them. It's taking an affirmative step to listen to and letting people know they are heard, seen and understood. It's the hard, but rewarding, work of building relationships. Empathic Intentionality happens one day at a time, one moment at a time, one neighborhood at a time, one block at a time, one person at a time. The walk is a marathon, not a sprint, and we must make it a priority.

On our walks to the “end of the block,” I had the opportunity to really learn about my friend, Anthony. He shared the real factors behind his hopes, his dreams and his fears. He shared his “why” so I could understand and help him with his “what.” The more I learned about him, the more I was able to determine what type of friend he most needed me to be at any given time. Sometimes he needed a partner, other times a problem solver, at times an advocate and at other times a devil's advocate. The key was to hear him and then lean into the appropriate role as best I could. This was not a one-way street. As I learned more about him, he also learned more about me. We developed a level of trust that allowed us to introduce more complex issues and extend grace to each other with more freedom when we blew it, because we knew we truly cared about one another. That is trust.

Our communities have so many more stories than the ones Anthony and I shared. There are hopes, dreams and fears in our neighborhoods too. People want to be safe, healthy and happy. They want to feel joy and spread joy. They want to feel safe to cry when something is wrong or shout when they are frustrated. They want to be heard. They want to feel like those who are listening are actually helping to address their challenges, walking the walk with them.

As health care professionals, we must be present. We must have the same level of desire to be trusted by our neighbors as our community's desire to feel trust with us. Trusting partnerships will take us far in the quest for healthy communities. Being present and showing Empathic Intentionality is how we learn where the areas of distrust reside. It's how we come to understand that the current mistrust is valid, even if it isn't rooted in the facts as we understand them. Facts in and of themselves can be evidence of truth; however, they are not necessarily the “truth” to all. The facts don't always provide all of the context. Perception is reality to many people. It is through conversation and shared life experiences that we glean true perception and context and can then move forward to build trust.



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Why must we be present as health care professionals? Our presence eases anxiety and fear. Our Empathic Intentionality, with a dose of fortune and grace, is the first step to overcoming the anxiety and fear that is based on individual and collectively lived experiences. Some of these may be rooted in atrocities such as the [US Experiment on Untreated Syphilis at Tuskegee](#) or the treatment of [Henrietta Lacks](#). Others may be rooted in something as routine as a cousin's experience that fell far short of expectations. Regardless of the source, when a nerve is touched or expectation failed, a seed of mistrust is sown if that person isn't heard, understood (even if their "facts" are wrong) and treated with respect. That seed, if left unattended, will grow into a weed of misunderstanding and misinformation and will become a part of the landscape of the blocks that we walk. Together, we can change that landscape into a positive one built on trust and by simply being present.

Fortunately, the health care community has far more listeners than just one kid who was willing to carry a cello to the end of a block. We are trusted professionals who are trained, equipped, willing and able to step in to hear the stories and say, "I am here. How can I help?" We are Grand Stewards of Trust. We are already present in so many forms and personas, from point-of-care clinicians, staff and administrators to community health workers, philanthropic officers, cooks, housekeepers, security guards and parking attendants. Each person on our all-inclusive health care team is a peer-to-peer touch point who can engage in Empathic Intentionality.

So, let's take a walk with our neighbors. Let's go all the way to the "end of the block."
Believe me, it's worth it. What's your next step?

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