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# Malcolm Gladwell's "Talking to Strangers" applied to patient care

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The weight of words in whole person care

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## WHOLE PERSON CARE

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# MALCOLM GLADWELL'S "TALKING TO STRANGERS" APPLIED TO PATIENT CARE\*

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est-selling author Malcolm Gladwell's latest book, "Talking to Strangers: What we Should Know About the People we Don't Know", highlights how there are frequent misunderstandings in our communications with others. He explains that confusions are more common the less-well we know who we are speaking with—and particularly when we are "talking to strangers."

Select examples from the book include:

- 1. Prime Minister Chamberlain's misinterpretations of Hitler's intentions related to the invasion of neighboring countries.
- 2. Bernie Madoff winning the trust of savvy investors.
- 3. The circumstances surrounding Sandra Bland's wrongful arrest that culminated in her suicide.

Gladwell explores the false assumptions and mistakes we make when dealing with people we don't know. In reading it, I could not stop thinking about conversations between patients and healthcare professionals. I am fortunate to have practiced at the same institution for many years and to have relationships with some of my patients for 25 years; with many of these patients there is familiarity, comfort, and mutual understanding. However, when I am working on the inpatient units, caring for patients newly assigned to me or those who usually see my colleagues, I am in fact, "talking to strangers."

<sup>\*</sup>This article has been originally published on CLOSLER, 3 Jan. 2020.

Here are five tips that I took away from the book that may help healthcare professionals when talking to patients that they do not know well:

- 1. Consciously reflect upon the idea that we often misread those we don't know well.
- 2. When patients are uncomfortable or stressed, their communications may be less clear or accurate as compared to when they are at their best. This will naturally influence our ability to learn their true story or understand their authentic perspectives.
- 3. We are often missing vital pieces of our patients' back stories that could help us understand their beliefs and behaviors. Asking about such particulars can help to establish rapport, shows genuine interest, and can convert stranger to friend.
- 4. Keep in mind psychologist Dr. Timothy Levine's "Truth Default Theory." This model explains that most people tend to believe anything that they hear, even if there is opposing evidence. Some patients may consciously elect NOT to be truthful or candid with their physician for various reasons.
- 5. Know that we all have a predisposition to doubt "out-of-the-ordinary occurrences." As such, IF you witness something bad (like bullying of anyone [e.g. a trainee or a nurse], or a colleague acting inappropriately or unprofessionally), know that you are wired to convince yourself that things are not as they seem and that you are incorrect in your assessment. To counter this, look carefully at the facts and reflect thoughtfully on the details. If you notice that something is amiss, speak up.