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# Understanding the Relational Implications of Treating Complex Patients in Integrated Primary Care Settings

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## Background

- The number of people who see their primary care physician (PCP) rather than a psychiatrist for mental health care is increasing<sup>1</sup> and is projected to continue an upward trend post-COVID-19<sup>2,3</sup>
- Many PCPs report experiencing burnout due to a sense of decreased autonomy, increased patient load, and the pressure to meet quality metrics<sup>4</sup>, among other stressors, leading health researchers to identify physician burnout as a public health crisis<sup>5</sup>
- As physician burnout becomes a rising concern, it is important to examine what role treating increasing numbers of patients with behavioral health needs might play
- Working with patients with behavioral health needs can be demanding and emotionally draining<sup>6</sup>, and this stress shapes the patient-provider relationship in unique ways not yet explored in the literature



## The Therapeutic Relationship in Primary Care

- Applying the idea of the psychotherapeutic relationship to primary care can help frame relationships with patients who are psychologically complex
- Michael Balint first began applying the concept of the therapeutic relationship in psychotherapy to doctors and their patients in the 1950s, focusing on common problems within the general practice setting<sup>7</sup>



- The doctor-patient relationship, according to Balint, is characterized by a series of 'offers' from the patient and 'responses' from the doctor, the outcome of which determines not only diagnosis but also the level with which the patient feels heard and develops trust in the relationship<sup>8</sup>

## Trust, Collaboration, and the Working Alliance

- Trust is a significant factor in a successful healthcare relationship, and may depend upon varying factors including culture, socioeconomic status, gender, and level of agreement with the doctor<sup>9</sup>
- Trust can be viewed as akin to 'social capital' or an investment in the treatment relationship and may be a better predictor of treatment adherence than satisfaction<sup>10</sup>
- Patients with behavioral health needs experience greater levels of stigma in the healthcare relationship and have difficulty trusting and forming relationships<sup>11,12,6</sup>



- Borden's theory on the working alliance in psychotherapy names collaboration as a crucial element, which not only involves an agreement on goals and tasks, but also bonding between the patient and the provider<sup>13</sup>

## Relationships as the Center of Behavioral Health Integration: How Social Workers Can Help

- Relationships are central to integration and a driver of patient outcomes<sup>14, 10</sup>
- The development of conceptual models designed to understand the implications of behavioral health integration on the patient-provider relationship can help us to understand what factors contribute to the strengthening or deterioration of these relationships
- Social workers are skilled in complex patient care and relationship building<sup>15</sup> and can be effective additions to integrated teams
- Social workers can help support providers in primary care practices by providing mental health resources as well as education about trauma informed care approaches to treatment
- This support can help foster stronger patient-provider relationships as well as mitigate PCP burnout

See external document for references

