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Tyrrell County Reflection

**Summary and Social Determinants**

Overall, the service trip to Tyrrell County as part of PHYT 896 was an excellent and unique learning experience that influenced the way I think about practicing in rural communities. Over the course of the week, I was able to participate in a variety of activities that gave me insight into many different aspects of life in Tyrrell County and certain social determinants of health that impact the residents there. On the first day we arrived, I assisted some students in building a small garden at the Tyrrell House, the local assisted living facility. I had the opportunity to interact with residents of the Tyrrell House and a worker who organizes activities for the residents among other duties. This employee was very enthusiastic, had great ideas and seemed to be beloved by the residents. However, due to economic constraints, his hours had been reduced and he had to pick of other jobs around the Tyrrell House to make ends meet. This was just one example of how reduced financial capacity negatively impacts residents in Tyrrell County despite competent and resourceful individuals working in the health system there.

I spent the majority of the next two days working at the elementary school. I lead the children through activities designed to get them moving while also teaching them the importance of exercise, habits of healthy living, stress management, safety concerns and the importance of good nutrition. This activity was incredibly enriching. The students at the school were so full of energy and enthusiasm and were generally just wonderful kids. They seemed genuinely interested in learning about health and excited about getting active. However, this experience also opened my eyes to the realities that some of these children face in their daily lives. After answering a question regarding the dangers of riding with a drunk driver, one child informed me that his dad had picked him up from school one day and was drinking in the car. I reported this to the teacher and she informed me that stories like this were not at all uncommon for these students. This is just one example of stories I heard while at the school illustrating the difficult family/social environments that many of these children come from. As health professionals, we often think of the physical, mental and emotional health of our patients. However, the impact that stress of a difficult home life might have on a young child was not something I previously considered.

These two social determinants of health, financial resources and home/family life, were highlighted by my experience during the high school mentoring activity I participated in on our last day in Tyrrell County. I lead a small group discussion focused on adjusting to life after high school. I discussed some barriers and challenges as well as some tips and advice. I had heard from classmates that taught health classes at the high school that the students were easily distracted and not engaged. My experience couldn’t have been any different. I found that the students were interested in what I had to say and had lots of questions regarding how things would change after they left high school, regardless of their intended plans. A common theme centered on how they would pay for things; be it rent, tuition or groceries. This was almost always one of the first topics brought up by the students emphasizing the financial realties that these students face. Another topic of discussion focused primarily on being away from Tyrrell County and family. Some students seemed eager to leave while this was a primary concern for others. Again, this reminded me of how important social/familial relationships can be, especially for younger individuals.

As demonstrated by the examples above, two specific social determinants of health that were apparent to me through my experiences in Tyrrell County were the impact of financial constraints and the effect of family life on other aspects of health. We discussed how income can impact a population’s health in classes prior to the trip so I was expecting to seem some examples of this during our time in Tyrrell County. What the trip did was make what we talked about in the classroom real and tangible. It’s one thing to discuss the difficulties of affording shoes in class but quite another thing to actually see a “shoe library” in an elementary school gym where students who can’t afford tennis shoes can check-out shoes so they can play during PE. I was less ready to encounter examples of family life directly impacting students at school and their plans for after school. This was not something we directly discussed in class but it seemed apparent to me after my interactions with many of the young people and children in Tyrrell County. It makes sense that if a child doesn’t feel safe at home, their entire life will be impacted. While my experience was mostly with younger children, I could see this impacting other populations as well such as individuals suffering from domestic abuse or elderly neglect. It was a harsh reminder that sometimes our patient’s issues and concerns reach far outside of our traditionally considered impairment, activity and participation limitations.

**A Changed View**

My views on health and health services have been challenged throughout my time in the Doctor of Physical Therapy program at UNC and this course continued that education. Our program challenges us to consider our patients as a whole person rather than just a list of impairments. In our third year, we also focus on the healthcare system as a whole and our role in it as physical therapists. In this way, the my experiences in this course served as a kind of case study in what I’ve slowly been learning over the past two and a half years. As mentioned above, it gave tangible evidence to the impact that limited financial and health-related resources can have on healthcare delivery. In Tyrrell County, there were numerous examples of individuals overcoming this barrier through a combination of determination, collaboration and creativity. Additionally, this experience gave concrete reminders of potential for dissonance between healthcare providers and patients regarding primary concerns or goals. While as a physical therapist, I may be concerned about a patient’s falls risk, that patient may have larger concerns such as how to heat their house this winter or whether they can pay for repairs to their car so they will have adequate transportation. It is important for all healthcare providers to consider these issues but especially when working with vulnerable populations.

Another lesson learned on this trip was the importance of flexibility. On my part, this mostly meant willingness to change plans at a moments notice and occasionally step out of my comfort zone. But in regards to healthcare in rural or underserved communities, the same lessons apply. Tyrrell County does not have a physician or dentist practicing in the county. This means that healthcare professionals may need to be more flexible to address all the needs of their patients. Obviously, it is important to stay within our state’s scope of practice for our given professions, but health care in these communities requires a certain amount of versatility and adjustability when it comes to roles and responsibilities.

I also better understand the role of registered nurses (RNs) and nurse practitioners (NPs) in the health system. Before this trip, I had an embarrassingly poor understanding about the difference between these roles and the services they are trained to provide. The interdisciplinary nature of this this course allowed me to interact with students and professors in UNC’s DNP program. I gained a better understanding of the role these individuals can provide. For example, NPs are trained to review a patient’s medication list and make suggestions to encourage medication compliance. They are also trained to conduct a falls risk assessment in a patient’s home and make suggestions to improve safety. These are just a couple of examples of the incredibly valuable skills that the healthcare professionals can bring to rural communities such as Tyrrell County.

**Impact on Practice**

On our last day we discussed how our experience in Tyrrell County would impact our practice. For me, the biggest takeaway was attempting to synchronize my goals as a physical therapist with my patient’s goals. As mentioned above, this trip reminded me about the risk of mismatched patient and therapist goals. If my patient is working two jobs and concerned about making enough money to buy groceries this week, are they likely to complete the optimal 45-minute home exercise program that I have designed for them five days per week? Might it be more effective if I can get them light-duty restrictions at their job and provide a 15-minute home exercise program that gives the most efficient therapeutic benefit? Are there community resources that I might be able to point them to alleviate some of the mental and emotional stress they may be dealing with?

To effectively take this approach, I see two key habits that I must make a part of my daily practice. The first is becoming familiar with the community and resources in the area that I practice. As a physical therapist, I need to understand the economic and social environment in the community. I will need to build relationships with other healthcare professionals in the area and understand the services they can provide. This will allow me to anticipate some of the needs of my patients and know where to look if I cannot meet them. Secondly, it will be crucial for me to involve my patients in goal setting. I’m trying to make a habit now of asking all my patients some variation of “What is your main goal for therapy.” My hope is to use the information gained from this question to let the patient guide where their therapy is directed and make them feel as if they have some control over their health. Another question that might be beneficial to add would be “Is there anything that might be a barrier to your goal of therapy.” While I assume the answer will most often be “No” it may allow me some insight into some of the social determinants of health that may impact my patients. It will be important that I remain attentive to some of these barriers throughout the plan of care for a patient as our relationship grows.

Generally, it will be important to always consider my patients as real people with lives, worries and concerns that are not limited to whatever reason brought them to me as a patient. Working as a healthcare worker in a rural area such as Tyrrell County will require creativity, resiliency and community cooperation to effectively meet the needs of the population. This trip was an invaluable part of my education on my path to becoming a well-rounded physical therapist and I would recommend it to any future DPT students.