Tension in the Chinese
doctor-patient-family relationship
A qualitative study in Hunan Province, China

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Violence against doctors in China
Violence against doctors in China

There was still snow on the ground on the day, in late March, 2012, that Li Mengnan, a seventeen-year-old boy, hobbled into the First Affiliated Hospital of Harbin Medical University for the last time. He came from a remote town in Inner Mongolia, a ten-hour train ride away, and this was his sixth trip to the hospital in two years. During that time, his illness, an excruciating inflammation of the spine called ankylosing spondylitis, had got progressively worse. Earlier that day, the doctors at the hospital had sent him across town to a clinic for an X-ray, only to tell him, when he came back, that he

Doctor-patient relationship in China

Health System Short-comings
- Lack of gatekeeping to specialty care
- Ineffective legal recourse for disputes
- Doctors’ career dissatisfaction & burnout

Doctor-Patient Communication
- Promotes patient-centered care → Recovery, mental health, adherence, satisfaction
- Cultural factors
  Role of context and family members?

What are the communication factors that contribute to tension in the Chinese doctor-patient family relationship, in the context of surgery?
Qualitative Methods

- **Data collection: June-August 2015**
  - Hunan Province, China
  - Urban tertiary academic hospital
  - Breast lumpectomy procedure

- **Convenience sample (n = 29)**
  - Patients (n=11) and their family members (n=9)
  - Doctors (n=9) who perform breast surgery

- **Semi-structured, in-depth individual interviews**
  - 2 interviews for patients and family members
  - English with Mandarin interpreter
  - Audio-recorded, transcribed, translated to English

- **Analysis**
  - Thematic analysis
  - Bilingual team
## Participant Data

<table>
<thead>
<tr>
<th></th>
<th>Patients (n=11)</th>
<th>Family members (n=9)</th>
<th>Doctors (n=9)</th>
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</thead>
<tbody>
<tr>
<td><strong>Age in years, n</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 36</td>
<td>3</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>36 and older</td>
<td>8</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td><strong>Sex, n</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>10</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Male</td>
<td>1</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td><strong>Region of origin, n</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>6</td>
<td>5*</td>
<td>4</td>
</tr>
<tr>
<td>Suburban</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Rural</td>
<td>4</td>
<td>2</td>
<td>4</td>
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<tr>
<td><strong>Relation to patient, n</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spouse/Partner</td>
<td>-</td>
<td>5</td>
<td>-</td>
</tr>
<tr>
<td>Child</td>
<td>-</td>
<td>4</td>
<td>-</td>
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*One family member did not provide region of origin data
Trust degradation

Unmet expectations for achieving a basic understanding and powerlessness

Societal pressures that contributed to learned helplessness
THEME 1
Patients, Family, Doctors

Trust degradation
Media influence

For example interference with media...most of the reports on doctor/patient relationships, regardless of whose responsibility it is, most falls on the doctor first.

Doctor 2
Knowledge or communication gaps

After [each family member] asked they go back and communicate with each other and find contradictions again, and they can’t understand, so they come back to ask again...[T]his way the doctor feels really exhausted, and this process would create conflict. In the end it would lead to the lack of trust and coordination in both parties.

Doctor 8
Trust degradation

Unmet expectations for achieving a basic understanding and powerlessness

Climate of DISTRUST

MISTRUST
Unmet expectations for achieving a basic understanding and powerlessness

Lacking a basic understanding

If it's pathological changes then I just wanted to take a look at that booklet, then [Doctor V] said what is this you’re reading?...you put it there and don’t touch it, you don’t understand it anyway...I’m really dissatisfied they treat me this way...I want [Doctor V] to give me a clear answer. What the situation is roughly, whether it’s serious. Whether a little bit of precaution has to be taken, or to have an operation...

Patient 8, pre-op
[I]f it’s pathological changes then I just wanted to take a look at that booklet, then [Doctor V] said what is this you’re reading?...you put it there and don’t touch it, you don’t understand it anyway...I’m really dissatisfied they treat me this way...I want [Doctor V] to give me a clear answer. What the situation is roughly, whether it’s serious. Whether a little bit of precaution has to be taken, or to have an operation...

Patient 8, pre-op
Interpersonal level

(Doctors should) go to the ward to check on patients, to see what needs patients have. I think this way, at least it wouldn’t feel like the hospital is a cold place, feel like there’s not much of a sense of humanity...[T]he nurses are so busy...and the doctors are smoking, chatting and drinking tea when they don’t have anything to do, otherwise they’re holding their phones.

Patient 13, post-op
Hospital level

*If there aren’t acquaintances then you take a lot of detours...waste a lot more money...* After all for us we are from a rural town, perhaps it has to do with this, it was hard to find a suitable doctor, to find a suitable answer.

Patient 8, post-op
THEME 2
Patients, Family

Unmet expectations for achieving a basic understanding and powerlessness

Lacking a basic understanding

Lack of a humanistic and patient-centered approach that contributed to feeling powerless
THEME 1
Patients, Family, Doctors

Trust degradation

Climate of DISTRUST

MISTRUST

THEME 2
Patients, Family

Unmet expectations for achieving a basic understanding and powerlessness

Lacking a basic understanding

Lack of a humanistic and patient-centered approach that contributed to feeling powerless

THEME 3
Doctors

Societal pressures that contributed to learned helplessness
Societal pressures that contributed to learned helplessness
...I think perhaps there are too many people in China, so I don’t have that much time...If there were only a few patients, I would also spend a lot of time to communicate and interact with them.

...I think this is sort of going with the flow...I just adapt to this type of situation in China...[A]s to other needs, I don’t have a way to satisfy them, because time is limited, that’s the only way it can be.

Doctor 10
The Medical Services Department

For some [operations] that are more serious more complicated then we might have to go to our medical services department to conduct a communication with a full recording of the conversation, this way it prevents some accidental situations that occurs during and after the operation, it prevents the occurrence of disputes after the operation.

Doctor 10

Societal pressures

Societal pressures that contributed to learned helplessness

Fear and avoidance of blame in the event of complications
THEME 1
Patients, Family, Doctors

Trust degradation

Climate of DISTRUST

MISTRUST

THEME 2
Patients, Family

Unmet expectations for achieving a basic understanding and powerlessness

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THEME 3
Doctors

Societal pressures that contributed to learned helplessness

Societal pressures

Fear and avoidance of blame in the event of complications
**THEME 1**
Patients, Family, Doctors

- Trust degradation

**THEME 2**
Patients, Family

- Unmet expectations for achieving a basic understanding and powerlessness

**THEME 3**
Doctors

- Societal pressures that contributed to learned helplessness

**Recommendations**

- Lack of standardized dispute resolution process
  - Establish formal policies and procedures and increase awareness

- Inexperience, Inconvenience
  - Appointment scheduling
  - Patient navigators

- Media misrepresentation
  - Physician-led public awareness campaign

- Knowledge disparity
  - Patient- and Family-centered rounds
<table>
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**Conclusions**
- Shared understanding of system challenges contributing to interpersonal tension
- Tension embedded in a climate of distrust in Chinese society
- Signs of burnout among doctors

**Future Directions**
- Healthcare context-specific analysis of tension
- Longitudinal trends in perceptions & relationships
- Evaluation of interventions
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Questions?

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