



## Storytelling: Clinically Proven to Work

***A Birmingham hospital study shows how stories can measurably improve patients' health when more conventional methods fail.***

"Can you prove that stories make a difference?" I hear that question frequently in my travels, and whenever I do, I'm sorely tempted to say the following:

"Can I *prove* it? Even though stories have been the essential currency of human communication for thousands of years? Even though they reside at the core of every major religion on the planet? And even when human beings of every race, creed and nationality rely on them every day to make sense out of life - despite all that, you *still* need proof that they make a difference!?!"

Of course, I never say any of that. Instead, I always try to respond politely, but I can still feel my blood pressure rise. Which turns out to be an interesting coincidence, because I recently read about a study that not only addresses the make-a-difference question but can also help with my hypertension problem.



*Dr. Jeroan Allison*

Entitled "Culturally Appropriate Storytelling to Improve Blood Pressure," the study was conducted at Cooper Green Hospital in Birmingham, Alabama between 2006 and 2008. Dr. Jeroan Allison (currently a professor at the University of Massachusetts Medical School) was one of the principals behind the research, and I spoke with him by phone in February to learn more.

Dr. Allison told me that the initial inspiration for the study arose from communication problems between Cooper Green patients and their doctors. "It boiled down to a lack of trust," he said. "The doctors would say, 'You're taking your

March 2012

**Storytelling: Clinically Proven to Work**

Still looking for proof?  
We've got it.

**Informing or Connecting?**

Learn the difference in our  
March webinar.

**The 3 Things Audiences Want the Most**

Does your presentation  
deliver them?



## About Us

medication, aren't you?' and the patients would say, 'Of course,' but in reality, they weren't."

In some cases, Dr. Allison said, the patients had experienced side effects from their medication, but rather than report this to their doctor, they just stopped taking it. In other cases, the distrust was more profound: the patients felt the doctors were experimenting on them, so they ignored their advice entirely. Noncompliance, as the doctors call this behavior, was a serious problem.

Dr. Allison was particularly concerned about noncompliance among his African American patients with high blood pressure. African Americans are 49% more likely to die of stroke and 21% more likely to die of heart disease than whites. Fortunately, hypertension can be effectively controlled by medication, exercise, and proper diet, but if a patient won't listen to a doctor's instructions, the problem can get out of control quickly.

So, how do you increase compliance under these circumstances? The path to an answer, Dr. Allison said, started with Dr. Sandral Hulett, the CEO of Cooper Green Hospital. "She used to say, 'When there's a problem in the community, the solution is often found in the community.'" Dr. Allison and his colleagues saw this as a premise worth testing, and they devised a study to do just that.

First, they assembled their subjects: 299 African Americans from the Birmingham area, ages 18-80, who had been diagnosed with hypertension. These patients were then divided into two groups. The first (or control) group was given a series of DVDs to watch that contained "Healthy Minute" segments from a local TV news program. The segments addressed a wide range of health issues, but hypertension was not among them.

The second (or intervention) group was asked to watch a series of DVDs featuring patients who, like themselves, had high blood pressure. These patients told stories about how they were coping with the disease, how they learned to interact positively with their doctors, and how they developed techniques for staying on their medication.



The intervention group watched the first DVD at Cooper Green, had a second DVD mailed to them after 3 months, and a third after 6 months. Each DVD featured three storytellers sitting in an unadorned hospital room (complete with unflattering fluorescent lighting), talking straight to the camera. To say the production value of the interviews was low is to pay them a compliment, but the look was intentional. As Dr. Allison told me, the videos look like "just average people from the community talking, and it doesn't come across like they're trying to sell you something."

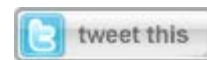
All of the subjects in the study had their blood pressure taken at the initial screening of the DVDs and at three-month intervals for a period of nine months. When the results were all in, Dr. Allison told me he

*free-range thinking* is written by Andy Goodman and edited by Lori Matsumoto. To read back issues, download free publications, and to learn more about our work, please visit [www.agoodmanonline.com](http://www.agoodmanonline.com) and [www.thegoodmancenter.com](http://www.thegoodmancenter.com).

To reach Andy directly, please call (323) 464-3956 or send an email to [andy@agoodmanonline.com](mailto:andy@agoodmanonline.com).



FOLLOW ME ON TWITTER



To subscribe to this newsletter, [click here](#). To unsubscribe, [click here](#).



**a goodman**

GOOD IDEAS FOR GOOD CAUSES

**a goodman**

444 North Larchmont Blvd.,  
Suite 102  
Los Angeles, CA 90004  
323.464.3956

was very surprised. "I was hoping to see a difference with the intervention group, but I wasn't expecting one as profound as we saw."

After just 3 months, subjects who had watched the stories lowered their systolic pressure (the first number in a blood pressure reading) by 6.53 points and their diastolic pressure (the second number) by an average of 3.05 points compared to the control group. If you extrapolated that kind of improvement over a larger population, Dr. Allison said, you could save thousands of lives every year.

The successful experiment in Birmingham is not the end of this story. Similar studies are now being conducted with patients who are coping with diabetes, sexually transmitted diseases and other health challenges. Dr. Allison is optimistic about what the results will show. "Letting people tell their own stories in a relaxed and natural format can be a powerful force for behavior change," he said, and he should know. He's seen the proof.

[^ back to top](#)

---

## Informing or Connecting?

***There's a difference, and we'll show you why it's critical in our March webinar on strategic communications.***

Did you know there are four points of connection between you and the audience you'd like to reach? If you know what they are, you can plan any form of outreach to touch all four points, but if you don't, you may be giving your audience an opportunity to disconnect and walk away.

In our two-hour online class ***Strategic Communications: Cutting Through the Clutter***, we'll identify "The Four Connecting Points" and show how three classic public interest campaigns used them to achieve remarkable results. In this process, we'll cover:

- The basics of framing
- Message creation and delivery
- An easy-to-use template for campaign design



Classes will be held on March 19th and 26th from 11a-12n PT each day (2-3p ET). Tuition is \$250 per student, and discounts are available to organizations registering 3 or more. Register online at [The Goodman Center](#).

[^ back to top](#)

---

## The 3 Things Audiences Want the Most

***Do your presentations deliver them? Join us March 22nd and 23rd for our webinar "Why Bad Presentations Happen to Good Causes" and make sure they do!***

Based on unprecedented research and incorporating the advice of twenty highly regarded public-speaking experts, ***Why Bad Presentations Happens to Good Causes*** is a two-hour online class designed to help presenters at all levels, from newbies to seasoned veterans. Curriculum in this two-hour course includes:

- The three most common characteristics of excellent presentations
- The five most frequent mistakes (and how to avoid them)
- Why PowerPoint should never be used as a presentation *and* a handout
- Techniques to help you deliver talks with greater confidence



Classes will be held on March 22nd and 23rd from 11a-12n Pacific each day (2-3p Eastern), and tuition is \$250 per student. To register, visit [The Goodman Center](#).