Dyadic Processes in the Patient-Provider Relationship

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Project Description

The purpose of this project is to (1) provide expanded mentoring of early career clinician-researchers in patient-oriented research (POR), and (2) extend his current research program to the study of patient-provider dyads, which will be studied through the integration of research tools into electronic health records (EHR) systems. Dr. Johnson’s trainees have emerged as research clinicians interested in conducting POR. There is a critical need for a better understanding of how the patient-provider relationship influences health outcomes and how these relationships can be augmented to improve outcomes. Much of the existing research on this topic is limited to a single perspective of the patient-provider relationship, but seldom do studies attempt to understand the relationship and its implications simultaneously from the patients and providers. Understanding how to measure and analyze the relationship from these two sides is a critical step in developing an effective model for interventions. Further, it is clear that medical informatics will become an increasingly central base of healthcare delivery in the United States and developing world. The proposed research emphasizes the contextual role of EHRs and other technologies (such as email, patient access to online information portals, etc) on the patient-provider dyads, with an emphasis on decisional balance preferences. Therefore, the candidate seeks to bridge these areas through gaining expertise in medical informatics, provider relations, dyadic data analysis, and international collaborative research to remain on the cutting edge of this rapidly evolving field. The K24 support would insure sufficient time to pursue this natural progression of his research while protecting time to devote to mentoring future clinician investigators in POR. The plans for development, research, and mentoring were designed to complement each other and to create a synergistic effect of mentoring and research in a new direction of POR. The proposed mentoring, research, and career development activities actively leverage existing infrastructure, resources and training initiatives provided by NIH, including the candidate's active research program, the Center for AIDS Prevention Studies (CAPS), the Center for AIDS Research (CFAR), and the Clinical and Translational Science Institute (CTSI) at UCSF.

Significance

There is a growing HIV+ population whose medical and psychosocial needs are diverse and complex. The primary care provider is often at the center of the support network positioned to optimize health outcomes. Improving the patient-provider relationship is a critical step toward improving survival and quality of life. Without adequate mentoring to promote new scientific talent, there will be a lack of innovation and progress in the development of evidence-based public health programs to improve practice and policy.