

Hello Game as a Mechanism to Elicit Advance Care Planning Conversations

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Objectives:

To describe the Hello game as a tool to initiate conversations

To practice playing the hello game as a participant as a way to elicit thinking about what matters most to you.

To demonstrate during the senior fair how to play the hello game

Background

In an increasing complex health care system approximately 75% of people are unable to make decisions for themselves at the end of life. Often surrogates have not had conversations about what is important with their loved ones.

Hello is a conversation game. It's the easy, non-threatening way to start a conversation with your family and friends about what matters most to you.

<https://commonpractice.com/collections/hello-game>

Description of how to play hello

<https://youtu.be/h2SRn8WjDCg>

Research

From <https://commonpractice.com/pages/research>

Studies about the use of the Common Practice game *Hello* (and its predecessor, *My Gift of Grace*) have been published in several peer-reviewed research journals and have utilized mixed methods (i.e. both quantitative and qualitative sources of data). Research about the game is conducted by independent researchers with no financial links with Common Practice. Following is a summary of the research so far.

Research question: Does playing the game lead to behavior change?

Note: All published studies referred to below include only gameplay as the intervention – no follow-up materials or other interventions were provided to participants.

- All published studies demonstrated high rates of subsequent Advance Care Planning behaviors within 3 months of playing the game. (58%-88%). [2,6,7,8]
- Among patients with chronic illness and their loved ones, 74% completed an ACP behavior after gameplay. [6,8]

- In a study of volunteers with unknown health status, 78% completed an ACP behavior within 3 months of gameplay and 73% of participants reported increased readiness to perform ACP behaviors. [2]
- In a study of patients with chronic illness and their loved ones, there was a significant increase in ratings of self efficacy to perform ACP behaviors. [6]
- In a population of South Asian Indian Americans, significant increases in all measured aspects of ACP Engagement were reported within 3 months of gameplay. [5]

Research question: Will people enjoy playing a game about living and dying?

- In post-game focus groups, all studied cohorts (including patients and caregivers) across diverse demographics and cultures reported that the game was enjoyable and a good method for talking about end-of-life issues. [5,6,8]
- In a study of South Asian Indian Americans, participants described the game as fun, thought-provoking and applicable to any culture. [5]
- In a study of the game's mechanics, patients with advanced chronic illness and their caregivers described the use of Thank-you chips as fun and engaging. No participants reported negative responses to the chips.
- None of the 236 focus group participants conducted in these studies reported the game to be psychologically burdensome or difficult to play.

Research Question: Is the game an effective tool in a community setting?

- In a study conducted at 12 community events (at public libraries, senior centers, retirement communities, churches, and private organizations), both quantitative behavior surveys and qualitative focus groups found that the game was a "well-received, positive experience for participants" and that 75% of participants performed ACP three months post-intervention. [8]

Research question: Is the game a useful tool for training healthcare staff?

- A study of healthcare chaplains showed that playing the game improved participants confidence in having end-of-life conversations with their peers and with patients. [7]
- Healthcare chaplains in this study also reported the game to be a positive experience and a useful educational tool. [7]

Research question: What do people talk about during the game?

- A large qualitative analysis of the game conversations found that the participants addressed clinically relevant topics related to ACP and that the discussions were well-aligned with expert consensus on key ACP topics. [3]

About the lead researcher

Research on Common Practice's conversation games is led by Lauren Jodi Van Scoy, M.D., ([click here for CV](#)) a pulmonary and critical care doctor at the Penn State Milton S. Hershey Medical Center and Assistant Professor of Medicine and Humanities at the Penn State College of Medicine.

Dr. Van Scoy has been [awarded a Parker B. Francis Foundation grant](#) from the American Thoracic Society to study the effects of the game in a larger, randomized controlled trial.

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References

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