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Analysing Role of SUKHI 222 Human Rights Movement in Covid-19 Era

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Abstract

It has never been more apparent to more people, individually, institutionally, and as a global society, that we face many urgent existential threats to our current way of life and indeed to our survival. COVID-19 is drawing keen attention to the connections between us all. Basic needs, especially, food, water and shelter, are being rationed in both rural areas and large cities across the globe. Nonprofits, governments and industry are challenged to respond. As part of a coordinated response, it is critical to be careful to use reliable information in ways that are not harmful. Actions taken must also contribute to the sustainable common good while positively impacting future generations. All considerations must be made systemically and include all disciplines of knowledge when determining plans and implementing actions. This discourse explored the role of SUKHI 222 Human Rights Campaign in the era of COVID-19.

Keywords: Food, Water, Shelter, Global Sustainability, Human Rights

Introduction

The scale of the current global problems cannot be overstated. There are over 840,000,000 people without access to clean water (2020, World Vision). Six hundred and ninety million human beings live without adequate nutrition (2020, Action Against Hunger). Over 150 million people on Earth are homeless with nearly 1.6 billion living with inadequate shelter (2020, Yale Global). Before COVID-19, the progress towards achieving the United Nation's Sustainable Development Goals (SDG's) by 2030 was behind schedule. The impact of Climate Change is a significant factor contributing to the suffering felt by hundreds of millions of poor and marginalized people, many of whom are children. Ongoing armed conflicts have displaced tens of millions more.

Traditional economies are shuttered as a result of the Covid-19 and the number of people that go hungry and succumb to starvation, dehydration or exposure to the elements is rapidly growing. Oxfam (2020) predicts that 12,000 people a day will soon die from malnutrititions that are related to the COVID-19 pandemic (2020, Relief Web). As individuals and communities isolate to slow the spread of the disease, an increasing strain is being applied to the traditional supply chain of essential ingredients, threatening human's

coexistence on planet Earth. Food, Water and Shelter as requirements, necessities for life, are not disputed. The right to life is supported in the International Declaration of Human Rights and the Declaration of Independence here in the USA. If life is guaranteed as a human right, and life requires measurable amounts of food, water and shelter, then it is a human right to have these needs met. The dignified access, within civil society, to those basic minimums, is required to survive and become a contributing member to that society.

The Problem

There are countless people and organizations with a similar overall mission of improving or solving the many struggles for the basic requirements of human life but without a universal and measurable equation. Without a universal basis, SUKHI 222 sees a global deficiency with the absence of a universal equation for addressing, implementing, and measuring the success of these efforts synergistically. The efficiency and effectiveness of so many efforts are therefore compromised, often mitigated, and rarely sustainable as a result.

The Objective

SUKHI 222 aims to provide a defined equation, unified vision, and measurable values to create a global network of the initiatives and a synergistic sustainable effort by and for all people. In order to build and sustain peace and prosperity for every individual, and society, everyone must first come together around specific goals that are agreed to be achievable and just. The SUKHI 222 Human Rights Campaign does this; it puts into finite measures these elements of supporting life itself.

The Concept of SUKHI 222: An Overview

SUKHI 222 proposes that we are all better off if each of us has dignified access to a minimum of 2 gallons of clean water a day (7.57 litres,) 2000 nutritional calories, and 200 ft.³ (5.66 cubic meters) of secure shelter as fundamental human rights. It is time to build a movement that supports a comprehensive scientific approach that is altruistic and, at the same time, gives direct benefit to anyone that participates. These goals can be achieved by researching and sharing pertinent information related to people's common dependence on finite natural resources. These goals can be achieved if there is agreement on strategies to achieve mutually beneficial results. Nevertheless, more efforts must be rendered than just research and proposing candidate methodologies. There must be collective action taken based on scientific and empathetic understanding, trusting that all will benefit if these universal needs are met. What is SUKHI? The word SUKHI translates from Nepali to English to mean "happy, peaceful, and prosperous". As an acronym, SUKHI stands for Sustainable Unified Kinetic Holistic Initiative (2020, SUKHI 222).

SUKHI 222 is a Not For Profit Corporation which is also known as Project 222 Human Rights Campaign. SUKHI 222 operates under the fiscal sponsorship of IFERS the Institute for Education Research and Scholarships, a 501c3 based in California. Recently, the international efforts have been successful in helping establish independent chapters of SUKHI 222 in Asia, Africa and Australia. In Ghana, a project to provide clean water to remote areas is being delayed by the lockdown caused by the pandemic. Emmanuel Adam Junior and his team of volunteers will resume training and distribution of water filters to provide 1,000 people with clean water. In Nepal, co-founder Bhim Khadka, founder of SUKHI 222 Nepal, distributed food and hygiene supplies to a rural school for orphans. Bhim is also actively involved in international outreach through his connections made by nearly 20 years working in the humanitarian sector. In Australia, co-founder Ronnie El Cheikh is going through the long process of incorporating SUKHI 222 Australia as an official nonprofit. It will soon be done, and Ronnie will turn his attention to helping expand internationally with a goal of at least ten country chapters by February 2021. (2020, SUKHI 222)

The SUKHI 222 Strategy

A large part of the SUKHI 222 strategy is to involve faculty and students in research to help better understand and address the current most urgent needs of Food Water or Shelter in a given population. It also aims, to identify existing practices involved in relief efforts and provide solution to the systemic problem. It would collaborate to find how new technologies, practices, and laws can transform the existing state of scarcity into sustainable self-reliance of local communities. It could help identify other NGOs, both large and small, that are working in related thematic areas affecting the lifecycle of food, water and shelter throughout the economy and social order. The project could also be attractive to the climate science sector as SUKHI 222 draws attention to the dramatic effects of climate change that the planet is already experiencing. International studies will also play a significant role. Besides research and helping to propose candidate methodologies for the initiatives support, students would be called as volunteers to help advocate SUKHI 222 through social media and with helping implement aid projects when appropriate.

Professor Dell DeChant, Convener, USF Urban Food Sovereignty Group, at the University of South Florida, is helping expand SUKHI 222 by introducing the concept to his students, colleagues and connections involved with the Food Policy and Food Sovereignty movements. Dell (D. Smith, personal communication, July 20, 2020) shared his thoughts:

The 222 project has a direct relationship to efforts to further food sovereignty anywhere in the world. To the extent that persons do not have minimal food

supplies, they do not have a sustainable existence. Food sovereignty projects work in the developed and developing world by prioritizing the agency of individuals and communities in producing their food, without reliance on outside entities and organizations. As 222 develops, it might look to food sovereignty groups for both support and opportunities for project sharing (Smith, 2020).

As part of the education system, it is necessary to teach situational awareness and how best to help the population and how to be a good citizen in helping to face all people's common existential threats. There will be a significant economic and environmental impact on global society as SUKHI 222 aids in presenting opportunities and educating the public of how they may participate. SUKHI 222 works towards a world where those unable to provide for themselves (due to circumstances beyond their control) are nurtured. It is regarded as a place in which all are assisted to grow and develop. People who have previously been left outside or apart shall be welcomed to civil society. Those people will be educated about the critical needs of the present and the future. Properly planned, executed, and monitored, the hundreds of billions of dollars spent on relief can no doubt be more effective if applied to sustainable practices addressing first what is most urgent and what is most necessary to relieve the suffering of those most in need. These identified resources and actions can also result in systemic solutions that allow the individual to contribute to society.

Empirical Review

Using human rights as a basis to define civil society, create policy, structure missions, and determine metrics for measuring the efficacy of a goal is both sensible and practical. With so many diverse cultures and environments, it can be challenging to identify a single message that can reach and move everyone. Life's most basic needs as a human right is a message that will resonate in all ears and can drive a unified global movement. Columbia Law School published an article in 2012 that describes why and how-to of using human rights to create and improve policy. The human rights framework offers a powerful and useful tool for governments to strengthen and improve the impact of laws and policies within local communities. Human rights standards provide evidence of an international consensus surrounding the existence of a problem and how it may be addressed (Columbia Law School, Human Rights Institute, 2012).

Every year, on December 10, the planet celebrates Human Rights Day. The recent years and current pandemic have resulted in a growing awareness of the global need for change and the increasing urgency to act immediately. Joining together around the world behind one movement and one idea is essential to impacting the change necessary to solve the global need of sustaining life. In 2019, Michelle Bachelet, UN High Commissioner for Human

Rights, emphasized the importance of speaking out for human rights. He highlighted the importance of the younger generations making an active movement possible. “Raising our voices is essential to the creation of a future of peace, justice and sustainable development. Moreover, this has been a year of tremendous activism – notably by young people” (2019, UN High Commissioner for Human Rights’ Message).

Now ask yourself: are you better off if your neighbour has dignified access within civil society to a minimum of 2 gallons of clean water a day, 2000 nutritional calories, and 200 ft.³ of secure shelter? The answer is always ‘yes’. Without these basic requirements for human life, despair or desperation take over simply to sustain survival and encroaching on one's neighbour often seem like the only remaining option. The answers demand for serious adherence to the principles of human right and the main thrust of this research.

Conclusion & Recommendations

The discourse has demonstrated the relevance of the SUKHI 222 strategy as a panacea to providing basic needs and protecting the fundamental human rights. To make a prediction, the next time one sees 222 on a clock, a road sign or anywhere else, one will think of SUKHI 222 and its relationship to food, water and shelter. When someone shares the movement with somebody else, it might manifest into the real altruistic catalyst for peace and prosperity for everyone, as it is intended to be. It is assumed also, that someone of apparent influence will hear of SUKHI 222 and perceive the transparency of the organization and endorse the movement. It will become a public conversation leading to collective action led by data compiled of pertinent information and calculated to achieve the globally shared goals best.

The SUKHI 222 strategy recommends developing a universally applicable equation for determining minimum requirements of food, water, and shelter within any population. It also advocates determining and implementing efforts and policy founded on local resources and accepted basic minimums; and tracking and measuring the efficacy and penetration of all human rights efforts through their impact on each individual’s dignified access to those basic minimums. The study suggests organizing all human rights efforts behind a resonating synergistic movement. The Study equally recommends that people subscribe and become a part of the movement, observe the guidelines, and follow its progress at SUKHI222.ORG to ensure a healthy living and posterity in this COVID-19 era.

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Effect of Selected Hyper Parameters on Accuracy Level of Deep Belief Network Algorithm Based Web Phishing Detection System.

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Abstract

The research sought to investigate the effects of altering values of three selected hyperparameters (Epoch, Learning rate and Drop out), on the accuracy level of a deep belief network algorithm based web phishing detection system. The accuracy level of the system changed as these optimiser values were altered. The experimental results showed that there was a positive linear relationship between Epoch and learning rate values with regards to the accuracy of the system. The study identified a negative linear relationship between dropout values and accuracy of the web phishing detection system. The study hence recommended that keeping Epoch values high around or a little above 25 cycles, maintaining a low dropout value (0.1), while increasing the value of learning rate (≥ 0.7) would ensure arrival at a high accuracy level of the deep belief network algorithm based web phishing detection system (0.987).

Keywords: Hyper Parameters, Epoch, Dropout, Learning Rate, Machine Learning.

Introduction

The growing need for more complex and computationally expensive machine learning models has resulted in tremendous growth in research on hyperparameters and hyperparameter optimisation. Machine learning research in recent years is focused on ensuring automation and reduction in human interference. The help of hyperparameters achieves the objective; these optimisers ensure peak performance of the model when tuned correctly. Every machine learning model possesses hyperparameters and automation to ensure optimal tuning of these parameters to achieve the best results. According to Fuerer & Hutter, (2019), regularisation, optimisation and network architecture of recent deep neural network algorithms are dependent on an array of hyperparameters. Varying the value of hyperparameters have a reflection on the performance of a model.

The Problem & Objective

According to Jan et al. (2018), it is usually unknown, which hyperparameter to tune to achieve optimal system performance when testing out a new algorithm on a data set. Furthermore, it is salient to determine what suitable ranges are for the optimisers and

which values in the range would produce a high performance of the system. Well-known algorithms like the support vector machines, it is already established as to which optimiser has a significant effect on the performance of the model, gamma and complexity optimisers are the parameters that affect the performance of the model the most. The motivation for this work hence is to identify the critical influencing optimisers for a deep believe network algorithm based web phishing detection model.

In this work, the deep belief network algorithm was used in developing a web phishing detection system, and an attempt is made towards identifying the effects of selected hyperparameters on the performance of the system and at what value the selected hyperparameter is optimised. The hyperparameters considered include Epoch, Learning rates, and Drop out values. The paper introduces the concept of hyperparameter optimisation, reviews related works supporting the optimisation of selected hyperparameters, identifies the procedure of the experiment, discusses results of the experiments and thus arrives at the identified conclusion.

Research Questions

The following research questions were answered in the course of the study.

1. What is the effect of epoch value on the accuracy of a Deep believe network algorithm based web phishing detection system?
2. What is the effect of Learning rate on the accuracy of a Deep believe network algorithm based web phishing detection system?
3. What is the effect of drop- out value on the accuracy of a Deep believe network algorithm based web phishing detection system.

Literature Review

Hyperparameters are settings that influence how well a model trained when they are tuned; they are generally set before the training process begin. Rodrigues (2018) supports that although existing outside a model, there is a correlation between parameter and accuracy of the model. Hyperparameters affect the model positively or negatively. Some examples of hyperparameters in machine learning are Learning Rate, Number of Epochs, Momentum, Regularisation constant, Number of branches in a decision tree, number of clusters in a clustering algorithm (like k-means), dropout, Hidden layer structure among others.

Epoch value is the hyperparameter that determines how many cycles the algorithm will transverse through the training data set. Having the model cycle once usually causes overfitting and running more epoch help balance the fitting. Increasing the epoch value

changes the model from an overfit to an optimal fit but should be watched to avoid arriving at an underfit. (Brownlee, 2018).

Learning rate is an optimiser that helps to determine to what extent the machine learning algorithm can be changed with regards to an estimated error at every time there is an update in the weight of the model. It has a tremendous impact on the model and should be considered critically. Learning values range between 0.0 and 1.0. Choosing the learning rate is challenging as a value too small may result in a lengthy training process that could get stuck, whereas a value too large may result in learning a sub-optimal set of weights too fast or an unstable training process. (Brownlee, 2019).

Dropout is the optimiser in a machine learning model that helps to avoid overfitting in the model. Dropout achieves its aim of reducing overfitting by setting the outgoing edges of hidden units (neurons that make up hidden layers) to point of 0(zero) at each update of the training phase randomly (Maklin, 2019). Dropout permits neurons to be ignored during the training of a group of neurons randomly selected. It means that these ignored units referred to as neurons are not considered during a specific forward or backward pass. Dropout refers to ignoring units (i.e. neurons) during the training phase of a specific set of neurons which is chosen at random. Ignoring Units mean these units are not considered during a particular forward or backward pass.

According to Rodrigues (2018), hyperparameters are very model specific. Optimising hyperparameters is very beneficial in a machine learning model as it ensures minimal human effort, they ensure that a model is trained to be problem-specific when optimised help reduce human efforts in applying machine learning to tasks. (Melis, et al., 2018; Snoek, et al., 2018). Hyperparameters also improve the ability to reproduce several results, and this helps in aiding ease and fairness of research results. Hyperparameters ensure a balanced comparison; this is because the fair comparison is possible only when the same level of tuning for the problem at hand is achieved.

Methodology

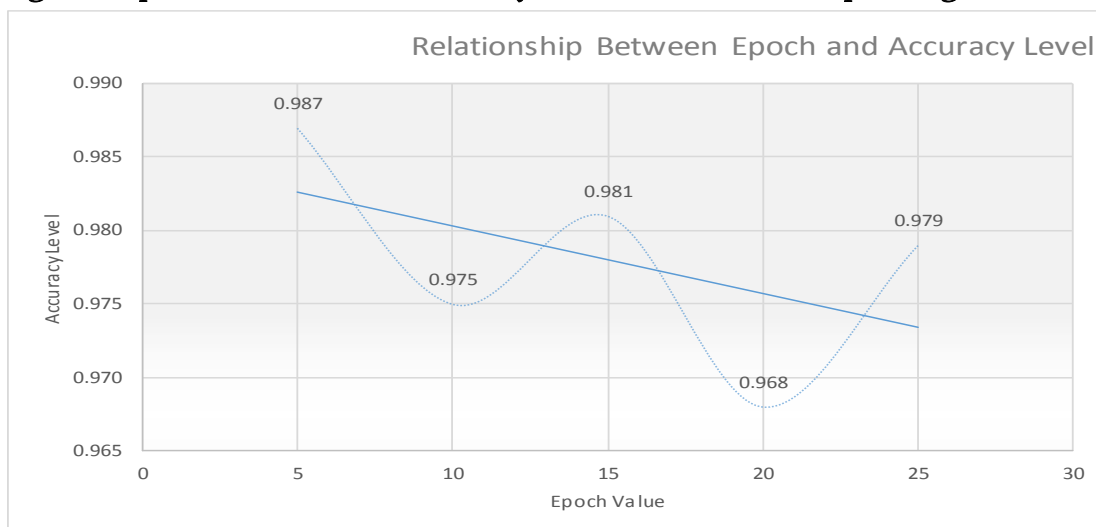
The experimental research method was used in this study to provide solutions to research problems. The study adopted the experimental research method because it allows the researchers to alter settings and tunings of the model and observe the changes thereof. Experimentation enabled the researchers to identify changes in the behaviour of the model when different hyperparameters were altered. In this study, the effect of the selected hyperparameters on the accuracy level of a Deep belief network Algorithm-based web phishing detection system was also identified. The experimental procedure commenced

with the development of the system. The system was developed using Python programming language and deploying a deep belief network algorithm. The web phishing detection system was developed in the following four steps: pre-processing, feature selection and extraction, model development, and prediction. In order to ascertain the effects of the learning rate, epoch values and drop out values, an experimental environment was set up on Jupyter notebook. This is an environment used in running data science and machine learning experiments. After setting up the experimental environment, the values of web phishing began to tune the values of Epoch, learning rate and drop out. We studied how changes to these selected hyperparameters affected the accuracy level of the system. The changes identified were logged and plotted out on the graph. It enabled the researchers to identify the relationship between each optimiser and the accuracy level of the web phishing detection system.

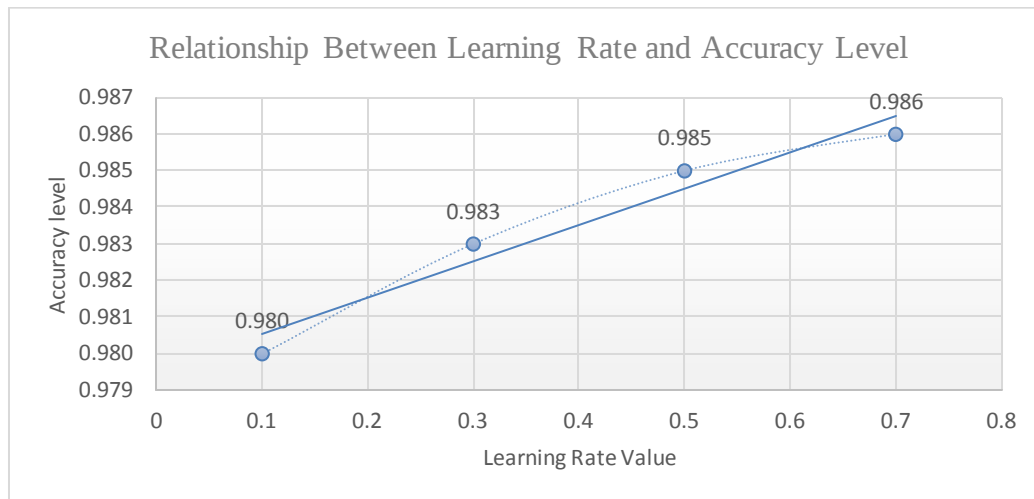
Results

Experimental data were analysed using graphs, and the results are presented below:

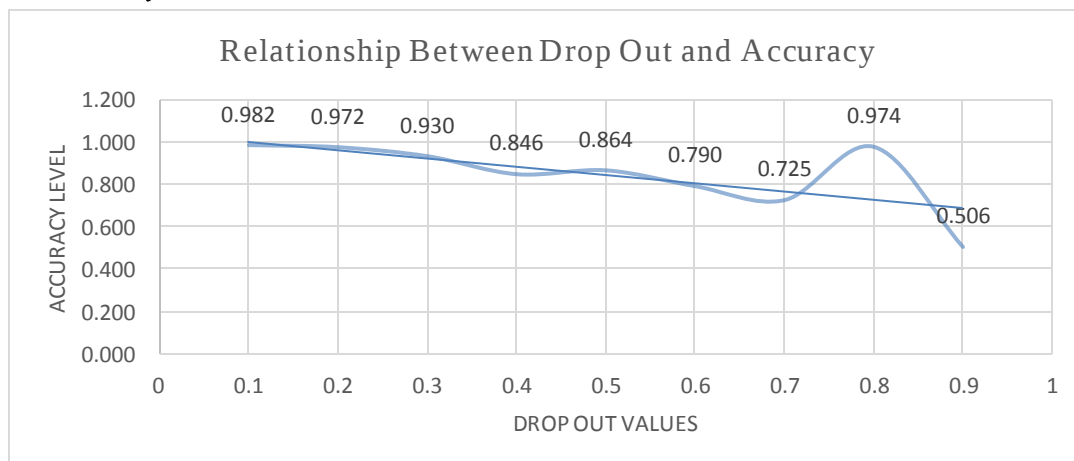
Figure 1 Epoch Values and the accuracy of the DBN-based web phishing detection system.



The experimental results, as shown in the graph in figure 1 above, outlines the estimated and actual model. The actual model is the curve with the crests and curves while the estimated model is the line of best fit (the straight-line graph). The line of best fit from the graph shows the linear relationship between the two variables (epoch value and accuracy level). The result shows accuracy level picking up at 25 epoch cycles hence depicting a positive linear relationship between epoch values and accuracy levels of a DBN-based web phishing detection system. This positive relationship implies that the accuracy level of the web detection system increased with increase in epoch values. It also means that the higher the number of iterations, the more likely to have an increase in accuracy levels.

Figure 2: Learning Rates and the accuracy of the DBN-based web phishing detection system.

The result, as seen on the graph in figure 2 above, shows a positive linear relationship between learning rates and the accuracy of the deep believe network algorithm based web phishing detection system. The results show that an increase in learning rates produces an increase in the accuracy of the model. When learning rates increased to 0.7, the accuracy level rose to 98.6%. Consequently, lower learning rates of 0.1 produces a lower accuracy level of 98%.

Figure 3: Relationship between Drop out and the accuracy of the DBN-based web phishing detection system.

The results as seen in the graph on figure 3 above presents a negatively sloped graph. It hence shows a negative linear relationship between drop-out values and accuracy levels of a deep belief network algorithm based web phishing detection system. With an increase in drop out values, the accuracy of the model reduced significantly. The dropout values of 0.1 gave an accuracy level of 98.2%, while dropout value of 0.7 pushed down the accuracy level of the system to 50.6%.

Discussion of Findings

The findings of the experimental research as seen in the charts as results presented shows that increasing the number of cycles/epoch value the model traverses through the data set. It tends to improve the fitness of the model hence increasing its accuracy. This finding is in line with (Brownlee, 2018), which suggests that increasing epoch value improves a model from an overfit to an optimal model. The study recommends leaving epoch values at around 25 cycles to avoid turning the model into an underfit.

Furthermore, the study identified a positive linear relationship between the learning rate and accuracy level. The model achieved a high accuracy level of 98.6%; when learning rate value was increased to 0.7. Learning rate values of 0.1 achieved lower accuracy rates for the model. The value of the learning rate should be chosen carefully to ensure optimisation. Finally, the study revealed that there was a negative linear relationship between drop out values and accuracy of the model. Increased drop out values reduced the accuracy level. The study hence recommends selecting epoch values of 25 cycles, learning rate values of 0.7 and a dropout value of 0.1 as the optimisation stage, at which the model performed at its best accuracy level.

Conclusion & Suggestion for Future Work

The study identified a positive linear relationship between epoch values and accuracy level of the deep belief network algorithm based web phishing detection system. It further identified a negative relationship between dropout values concerning the accuracy of the web phishing detection system. Increase in drop out values caused a decrease in accuracy levels of the system. However, there was a positive linear relationship between learning rate values and the accuracy of the DBN-based web phishing detection system. Increase in learning rate values caused an increase in accuracy values of the system.

The study showed that out of the three hyperparameters (Epoch, Learning rates and Dropout) examined in the experiment, changes in drop out had the most significant effect on the accuracy level of the model. Changes in dropout values have a drastic reducing effect on the accuracy of a web phishing detection system, reducing it significantly from 98.2% to 50.6%.

The study therefore recommended that keeping Epoch values high around 25 cycles, and maintaining a low dropout value (0.1), while increasing the value of learning rate (≥ 0.7) would ensure arrival at a high accuracy level of the deep belief network algorithm based web phishing detection system (0.987). Identifying appropriate technique to apply in optimising these hyperparameters is a suggestion for future work.

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Evolution of Fear in Healthcare Management: Analysing Influences of Communication Skills for Trust Development

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Abstract

Quality healthcare requires practitioners who possess the technical competence and communication skills for not only gathering and transferring information to patients but also for developing trust with patients in the process of clinical consultation. The study used discourse analysis to identify how poor communication skills significantly contribute to the mistrust experienced between patients and healthcare providers/clinicians. The study identified various professional practice gaps in existence such as clinicians/healthcare providers who are unaware of different scenarios that warrant the application of specific styles of soft skills of communication while interacting with patients who present with different attitudes/characteristics/personal attributes. Education is needed to provide a better understanding of the several factors that contribute to these presenting attitudes capable of building a wedge and creating mistrust between patients and healthcare providers/clinicians.

Keywords: Opinionated Patient, Dependent Patient, Communication Skills, Suspicious Patient, "Normal" Patient

Introduction

The author a few years ago in 2013, underwent a major abdominal surgical procedure which was debilitating, and she was out of work for five months (see Photo 1). With immense gratitude to God, she is recovered and in excellent health today. However, during these five months of recovery in 2013, the surgery experience created many dependencies on family members and healthcare providers. In addition to visits to the primary care doctor, there were also visits to other specialists as cardiologist, gynaecologist, urologist and general surgeons to complete what seemed to be a series of never-ending medical examinations, tests, scans, and other diagnostic studies. These underlying emotions and anxieties can eventually manifest as several kinds of patient behaviours and attitudes during a clinical visit. Aghanya (2016) agrees that clinicians could perceive various behaviours as overly curious, rude, dismissive, absurd, or downright bizarre. She posits that effective communication, especially in the healthcare sector, is essential for the wellbeing of patients and helps in the process of recuperation. Communication is the process of sharing

meanings, ideas and services which must be interactive for effectiveness. Effective communication is, however, proactive when the communicator possesses adequate communication skills.



Photo 1. A patient in hospital

The need for a study activity which addresses this vital component of healthcare practice was realized following this personal experience as a patient in the healthcare system. It was further substantiated after the review of various articles and research studies which explore the effects of empathy, compassionate interactions on patient care and its correlation if any, to the rate of clinician burn out. Many articles/journals/books/presentations highlight various aspects of communication in healthcare but fail to identify or explore the factors that contribute to the formation or hindrance of a productive and trusting relationship between the patient and clinician. There are no studies identified which address the methodological management of fears/anxieties with strategic communication styles for various patient attitudes/emotions.

Various studies highlight the evidence that when healthcare providers/clinicians are compassionate and strive to make more genuine connections with patients, they are happier and feel more fulfilled in their roles as this helps to reduce the risks of provider burn out. However, given that compassion is best implemented as an act, it became imperative to explore the aetiology and effects of anxieties in healthcare and more importantly how healthcare providers/clinicians can strategically apply the soft skills of communication to improve the chances of delivering compassionate care to establish trust with patients.

The Problem

As a clinician, being quite familiar with the clinical process that entailed this recovery period, the process created a great deal of anxiety and fear. Constantly grappling with several levels of anxiety and physical pain, this experience ultimately started to affect daily

mood and life outlook. It was a humbling experience which revealed that many, if not all patients in the healthcare system experience different levels of anxiety/fear due to the feeling of not knowing the outcome to any given clinical situation. "The unknown" can create feelings of crippling fear for some patients and others; can create moments of doubt, confusion, awkwardness (sometimes evidenced by misplaced smiles and laughter), irritation, and even bitterness. Ascertaining the relevance of communication skills in overcoming this kind of fear is, therefore, the main thrust of this research.

Method & Significance of Study

The study deployed discourse analysis to investigate the role and effectiveness of communication in healthcare. Findings and knowledge emanating from this study will help to provide strategies to healthcare providers/clinicians for active engagement apt for building trust with patients especially those who present to healthcare settings with fears and anxieties due to underlying emotions as anger, suspicions, dependence, defiance, feeling overwhelmed, talkative, sad, proud, opinionated, sceptical and so on. Irrespective of patients' attitude and countenance, utilizing strategic communication skills to transfer information from the healthcare provider should be done in a way that helps to allay patients' underlying fears and promote patients' understanding. It should most importantly, encourage the adherence to the recommendations of the healthcare provider/clinician.

This educational information applies to various levels of healthcare practices, such as primary prevention plans, education regarding disease and ailment management, prevention of hypertension, diabetes, obesity, smoking cessation plans. Secondary prevention plans which include effectively communicating to patients the measures that lead to early diagnosis and prompt treatment of their diseases. Finally, tertiary prevention plans which include the most appropriate ways to empathetically engage with patients as healthcare providers/clinicians attempt to improve the quality of life of patients with terminal illnesses should be adopted. It is achieved by appropriately relaying information regarding treatment and prognosis of existing ailments and discussing the best ways to reduce symptoms of existing chronic diseases.

The helpful resources gained from this study originate from critical analysis of peer-reviewed research articles and various studies, including 30 years of author's clinical experiences in diverse healthcare settings. The findings of this study would make a great teaching/learning tool in educational institutions as medical/dental/nursing schools, Healthcare practice settings such as medical clinics, emergency health clinics, hospitals, retail clinic, and urgent care clinics.

Literature Review

In recent times, an attempt to make sense of the correlation between the impact of fear on behaviours and life outlook, the works of various philosophers and their interpretations of fear were explored. Reading Dr Michael Fishers (2015) publication “Educating Ourselves: A Lovist or Fearist Perspective”, it was fascinating to note that his introductory paragraph detailed his observation as a Fearist, the correlation between how we live our lives and how we educate ourselves. Fisher (2015) went on further to ask this vital questions: But what exactly is fear? How does it evolve, and who gets to define it accurately? Can any single definition be all inclusively contained especially given the evolving human nature/views/opinions? Sometimes, there are even evolving philosophical views.

The healthcare atmosphere is an emotionally charged one capable of inducing various levels of anxieties/fears. We live in an emerging world of technological advancements where healthcare providers/clinicians are required to assess patient’s histories adequately, arrive at a diagnosis, and provide treatment plans in a fast-paced environment. Such expectation is especially true in rapid care delivery settings as urgent care, walk-in medical clinics, retail clinics, and emergency room clinics. It seems to be a more difficult task for the healthcare provider/clinician to rapidly establish a rapport with the anxious/fearful patient while simultaneously assessing and developing a treatment plan with the patient.

Healthcare providers/clinicians need to realize that patients often heavily interpret the quality of their medical care based on the emotions that they most often experienced during their clinical interactions with healthcare providers. To successfully build trust with patients, healthcare providers/clinicians must therefore, develop a unique approach to communicating with every patient. The clinician-patient relationship can be a simple or complex one depending on the clinician’s approach to allaying patient’s anxieties/fears and establishing an enduring relationship. It is unwise to assume that a productive relationship is achievable without much input from both parties. Just as in every other relationship, there needs to be more effort made by the healthcare provider to relationship building because he/she is the figure of authority who guides the flow of the consultation.

A wrong move is when healthcare providers rely entirely on patients to set the tone of a consultation visit and to control the visit flow pattern. Due to the patient’s underlying fears, many patients expectantly look to healthcare providers to set the tone of the visit. Most patients would respond quickly and positively to a friendly tone from the healthcare provider/clinician. Many patients would also prefer to quickly establish this rapport than fidget in fear/anxiety in the clinician’s presence for the duration of the visit.

Healthcare providers/clinician must take advantage of this common patient expectation and apply it strategically to help allay the patient's fears and gain their trust. There is no disputing the fact that when people feel at ease and are less fearful, they retain more information disclosed to them. This process of trust development between both parties requires a delicate balancing act. The division of race, ethnicity, and culture may be reflected in the health of the people in a community/society/nation. For instance, in the United States, despite recent progress in overall national healthcare delivery, disparities continue in the rising incidence of illness and death among African Americans, Latino/Hispanics, Native Americans, Asian Americans, Alaska Natives, and Pacific Islanders as compared with the United States population as a whole.

Various patient perspectives and mistrust of standard healthcare practices may emanate from the knowledge of such historical events as the 1932 Tuskegee study of black men which was unfairly conducted without adequate study disclosure or informed consents from study participants. There could be a result of increasing fears/anxieties/mistrusts from the population/race most affected by the memories of such unfortunate study events (<https://www.cdc.gov/tuskegee/timeline.htm>).

Healthcare practices (including communication process) must, therefore, be reflective of cultural sensitivities, perceived underlying fears and reservations emanating from historical events in various communities. Although subtle at times, culture does play a significant impact on the provision of appropriate healthcare services. Acknowledging, recognizing, and addressing these complexities will help facilitate learning and trust promotion between the healthcare providers/clinicians and patients. It is highly attainable irrespective of background, culture, ideologies, attitudes, and individualities.

Another philosopher with a breathtaking view is Osinakachi Akuma Kalu (Kalu, 2018). He argues that the necessary foundation of philosophy is rooted in problem-solving. His suggestion is congruent with the theory of evolution of fear in healthcare. Kalu (2018) assumes that identifying the roots of common fears of patients and healthcare providers/clinicians. He posits that going further to develop resources that teach the necessary communication skills will help to avert these common fears/anxieties experienced in healthcare settings. Kalu (2018, 53-54) further touched on the role of fear in the human struggle by identifying fear as a great motivator which is not typically self-contained but instead manifests as an external factor which when perceived, motivates one to react. How we choose to direct these emotions that conjure up within us due to external fears is a significant determinant of whether our fears/anxieties shall either control or not control our lives.

Another exciting opportunity was the review of another philosopher's work, Professor Desh Subba, who has detailed some interesting observations of fear from a positive perspective (Subba, 2014). He believes fear gives an interpretation of both life and the world. According to (Subba, 2014) Fearism exists as a theory and in order to study Fearism, there is need to study all aspects of Fears, its' causes, its' effects, how it has embedded into the societal values, affecting our behaviours and attitudes (our essence, our being). Subba (2014, p. 52) also indicates that fear comes from the human mind, and while the existence of fear precedes essence, a combination of exterior and interior factors generates fears. Applicable to the theory of Fearism in healthcare, patient's awareness of clinical diagnosis and prognosis can either create feelings of uncertainties, despair/fears/anxieties or can create an innate commitment for the patient to battle the disease process bravely. The author argues that knowing a patient's mindset/being/essence/reservations helps the healthcare provider/clinician to engage strategically, which contributes to some tranquillity amidst an otherwise chaotic moment.

In essence, the moment a healthcare provider/clinician is faced with an unfortunate health experience become exposed, common fears/anxieties is felt by patients. It is usually a life-changing experience that spurred into action, the development of resources for improving communication patterns that will help to alleviate patient's and healthcare provider's Fears/anxieties in various healthcare settings.

Review of Empirical Studies

The following studies were reviewed to give an empirical undertone to this study:

Empathy decline and its reasons. a systematic review of studies with medical students and residents. In this study, the results of reviewed studies, especially those with longitudinal data, suggest that empathy decline during medical school and residency compromises striving toward professionalism and may threaten health care quality. Theory-based investigations of the factors that contribute to empathy decline among trainees and improvement of the validity of self-assessment methods are necessary for further research. (<https://www.ncbi.nlm.nih.gov/pubmed/21670661>).

Teaching empathy to medical students. an updated, systematic review: The findings of this study suggest that educational interventions can be useful in maintaining and enhancing empathy in undergraduate medical students. Also, it highlights the need for multicenter, randomized controlled trials, reporting long-term data to evaluate the longevity of intervention effects. Defining empathy remains problematic, and the authors called for

conceptual clarity to aid future research
(<https://www.ncbi.nlm.nih.gov/pubmed/23807099>).

To add to conceptual clarity, Aghanya (2016) in her book *Simple Tips to Developing a Productive Clinician-Patient Relationship* also provides several practical tips that healthcare providers/clinicians can implement during consultation visits with patients that will help to alleviate patient's fears and anxieties. It explores the aetiology of how various underlying fears and anxieties can manifest as patient's attitudes and behaviours which might become deterrents to the establishment of trust and relationships between patients and healthcare providers.

The importance of identifying these unique characteristics and implementing strategic communication styles can never be overemphasized. Healthcare providers/clinicians need to refrain from using a one-size-fits-all communication approach for all patient encounters because people have different personalities, backgrounds, and characteristics and thus perceive and react differently to the same information presented to them. To attain long-lasting trust development through active interaction, the healthcare provider/clinician must implement a communication style specifically tailored to each patient's personality, attitude, individuality, and background. Knowledge of a patient's mindset/being/essence helps the clinician to engage strategically aiding tranquillity amidst an otherwise chaotic moment of life.

Findings, Conclusion & Recommendation

The review of literature has shown that communication is vital in overcoming and managing fear among patients of every category. The finding buttressed the relevance of possessing communication skills by health care workers. The study concludes that communication skills are needed for effective communication in healthcare to overcome fear among patients. The study recommends the adoption of the contents of Aghanya's (2016), *Simple Tips to Developing a Productive Clinician-Patient Relationship*. It gives the communication tips for allaying Fears/anxieties for 16 different scenarios of patient's attitudes/behaviours.

Aghanya (2016) argues that when one interacts with patients and encounters various attitudes, there are more appropriate times to implement either one or more of the communication styles listed in the below paragraphs. While utilizing this book as a resource in the medical/nursing educational curriculum, students would become empowered in learning the skills to assist patients to feel comfortable in their presence. She believes that students will learn when to effectively implement such communication styles

as maintaining more constant eye contact versus temporarily avoiding eye contact (to give patients the chance to establish a train of thought pattern), and when to speak softly versus loudly (to create a tranquil environment). It will also help them understand when to use open versus close-ended questioning (to gain and keep patient's attention); when to use targeted questioning patterns (to promote engagement) and when to use humour (to reduce a tense atmosphere). Students will equally learn when to listen more than speak (to assist anxious patients to calm down during the history-taking process). In essence, there are also times when it is most appropriate to nod in affirmation as patients speak, when to speak with authority while maintaining eye contact and when to provide narratives of clinical finding during the patient examination process. Shubba (2014) posits these styles are implemented with a strategy to help create a tranquil consultation atmosphere, reduce anxiety and fear while promoting the chances for trust development in all settings, including the healthcare settings.

The book will be an excellent resource to introduce students to the simple steps that can be appropriately implemented through the strategic use of communication styles to help improve the chances of not only establishing better connections with patients but also reducing the risks of frustrations and burn out in their future healthcare practices.

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