

#goodlistening:

How to actively hear what
others have to say

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Objectives

- List one effective verbal response to listening
- List one effective non-verbal response to listening
- Describe one way these skills can be helpful to communication



Listen, listen



Are we really that bad at listening?



So many listening opportunities

- A friend has a problem
 - A mom is telling a story
 - A teacher/boss is giving an assignment
 - A favorite TV show is on
 - Someone is giving a speech
-
- You're in an argument and want out
 - People won't get off your back about doing something you don't want to do
 - You want someone else to change
 - You're worried about a quiet friend who hasn't been himself lately

Nonverbal strategies

Non-verbal skills (SOLER)

Squarely face the person

Open your posture

Lean towards the speaker

Eye contact

Relax

#begenuine

#bepresent

Gordon's Road Blocks to Listening

1. Ordering, directing, or commanding
2. Warning or threatening
3. Moralizing, preaching, or telling clients what they "should" do
4. Disagreeing, judging, criticizing, or blaming
5. Agreeing, approving, or praising
6. Shaming, ridiculing, name calling, or labeling
7. Giving advice, making suggestions, or providing solutions
8. Persuading with logic, arguing, or lecturing
9. Interpreting or analyzing
10. Questioning or probing
11. Reassuring sympathizing, or consoling
12. Withdrawing, distracting, humoring, or changing the subject
13. (Assuming)



Do it.

You'll feel better. Really.

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Communication Styles (MI)

Directing



Following



Guiding



Verbal strategies

Reflections

- Restating using the words of the client, those issues that are important to her.
- A statement, not a question.
- Ends with a intonation down
- Affirms, validates, does not judge
- Keeps the patient thinking

- **Goal**: to make a guess as to what the speaker means, to demonstrate listening skills
- **Benefit**: the patient hears her own words twice, patient feels heard.

Example

“This has been the absolute worst week. Nothing seems to be going right.”

- “It’s been a frustrating week.”
- “You’re looking for something to go your way.”
- “You’ve really had to manage a lot.”

Example

“My daughter thinks it’s her body and therefore she should be able to do what she wants with it. Hooking up is no big deal to her. She just doesn’t get why I won’t back off.”

- “Her sexual behavior is a concern for you.”
- “You wish y’all didn’t argue as much.”
- “Your daughter’s future is important to you, and it feels challenging that y’all are not on the same page about choices.”
- “You wish she’d understand how much you care.”
- “On one side you want to help your daughter, and on the other, you notice your methods are causing some conflict.”

Example

“I’ve been depressed lately. I keep trying things other than drinking to help myself feel better, but nothing seems to work, except having a couple of drinks.”

- “You have been feeling down.”
- “You might like if something other than drinking worked.”
- “You’re looking for a way to feel better that doesn’t involve drinking.”
- “and that feeling doesn’t last in the long-term.” (amplified)

Practice

“I know I could do some things differently, but if she would just back off, then the situation would be a whole lot less tense; then these things wouldn’t happen.”

- 1.
- 2.
- 3.

Practice

“I know I’m not perfect, but why do they always have to tell me what to do. I’m not 3!”

- 1.
- 2.
- 3.

Practice

Example

“This has been the absolute worst week. Nothing seems to be going right.”

- “It’s been a frustrating week.”
- “You’re looking for something to go your way.”
- “You’ve really had to manage a lot.”

When disappointments happen

- Watch for minimizing, trivializing, dismissing, or problem solving.
- “It’s not that bad.”
- “You should just find new girls to hang out with.”
- “You’re just a kid. Don’t be silly.”
- “These things won’t matter in 5 years.”
- “This will all blow over by next week.”
- “Well, did you try...”

Honor the feeling and experience

- “That is such a tough situation.”
- “I can only guess what that must be like.”
- “I can see why today would have been hard.”
- “Thanks so much for telling me. Good or bad, easy or tough I do love to know what is going on with you.”
- “Is there anyway that I can help?”
- “I think I might have felt... in that situation.”

The power of reflections

- They demonstrate listening
- They demonstrate patience and empathy
- They encourage someone to open up and talk more if they want
- They can be used with careful thought

“I just don’t like any vegetables. They’re so gross.”

- *“You haven’t tasted a vegetable that you like.”*
- *“On the one hand you want to make a healthy choice and on the other hand eating what tastes good is important to you.”*

Praise

- Genuine
- Specific / Meaningful
- For effort
- More on skill over appearance

Praise

“Thank you for...”

“I appreciate that you...”

“Great job for...”

“It was so wonderful to see you...”

“Your hard work really helped you...”

“I love it when you...”

“...was a big help to me / the family.”

Affirmations

- Say something **positive or complimentary** (*“You’ve done well in keeping up with your dialysis these past months”*)
- Provide personal **reinforcement** (*“I’m really proud of you”; I’m pleased to hear that”; That’s good”*)
- Comment on the patient’s **strengths, abilities, or efforts** in any area (*“You’re giving this some serious thought”; You’ve put hard work into cutting down your smoking”*)

Examples

- *“I can tell you’ve put a lot of thought into your ideas.”*
- *“You seem to have been working hard on making changes.”*
- *“You are someone who is good at setting goals.”*
- *“You put a lot of thought before just jumping into a change.”*

#reflectionsarepowerful

Open-ended Questions

- Statements that require more than a one word response (yes/no).
- Encourages client to discuss rather than respond
- Limit starting a question with “why”

Most of our questions are closed

- Youth: “What she did was so wrong, right?”
- Parents: “Did you try to this to fix the problem?”
- Clinicians: “How often do you experience panic?”
- Doctor: “Are you having any pain?”

Examples

- Did you have a good day?
- Do you drink?
- Do you brush your teeth everyday?
- What is one thing you learned/took from today?
- Tell me your experiences with alcohol.
- What is one thing about brushing that you would like to do better?

Negative Self Talk

“How true is this statement?”

“How helpful is this thought?”

“When would a person say this to another person?” (if not, then “how come I say it to myself?”)

Giving Advice

“Are you interested in any ideas?”

“Want any help to think of ideas/solutions?”

“I know of one thing that worked for someone else. Interested in hearing it?”

“Can I offer some ideas?”

Motivational Interviewing

Can I make someone change? Why don't people change?

- A person with a previous DUI begins to drive home after a night at the bar.
- A person who states multiple times they want to make better grades is noted frequently playing on their phone during study hall.
- A pulmonary surgeon is seen smoking 3-4 cigarettes on her lunch break everyday.
- A person with diabetes frequently eats candy bar snacks.
- A person recently on parole continues to hang with former, problematic friendships.
- A person continues to buy unnecessary sale items despite recent conversation with partner about finances.

Activity

On a sheet of paper write:

- 5 of your favorite activities
- 5 major things you have done or/and will do today

You will not be forced to share your lists

Theories of Change

- Self-Determination Theory
- Ecological Model
- Social Cognitive Theory
- Health Belief Model
- Theory of Planned Behavior
- Transtheoretical Stages of Change Model

Health Belief Model

Concept	Definition	Potential Change Strategies
Perceived susceptibility	Beliefs about chances of getting a condition	<ul style="list-style-type: none">• Define what populations are at risk• Tailor risk information based on individual's characteristics, behaviors• Help individual develop accurate perception of own risk
Perceived severity	Beliefs about seriousness of a condition and its consequences	<ul style="list-style-type: none">• Specify the consequences of a condition and recommend action
Perceived benefits	Beliefs about the effectiveness of taking action to reduce risk or seriousness	<ul style="list-style-type: none">• Explain how, where, and when to take action and what the potential positive results will be

Health Belief Model (con't)

Concept	Definition	Potential Change Strategies
Perceived barriers	Beliefs about the material and psychological costs of taking action	<ul style="list-style-type: none">• Offer reassurance, incentives, and assistance; correct misinformation
Cues to action	Factors that activate “readiness to change”	<ul style="list-style-type: none">• Provide “how to” information, promote awareness, and employ reminder systems
Self-efficacy	Confidence in one’s ability to take action	<ul style="list-style-type: none">• Use progressive goal setting• Give verbal reinforcement• Provide training and guidance in performing action• Demonstrate desired behaviors

HBM example

Me

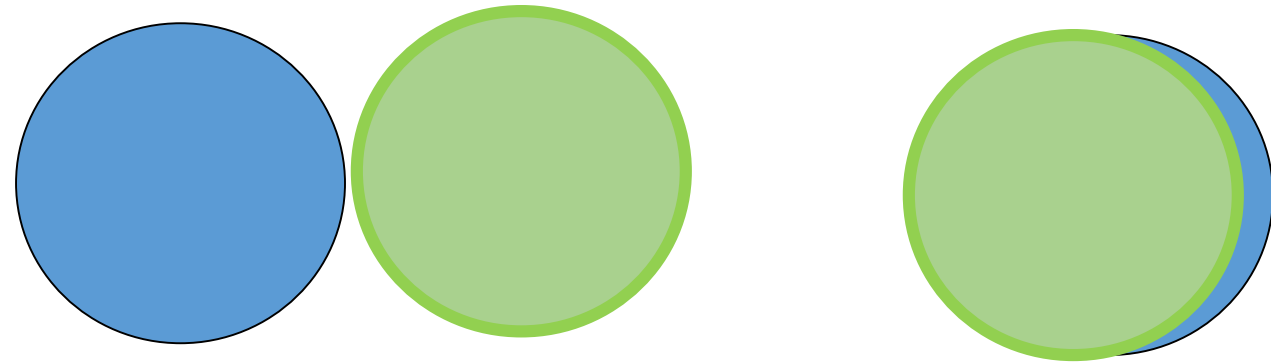
1. Dry eye, previous story
2. High – blindness
3. Less dry eye, I'm taking care of self, feel organized and not chaotic, hate glasses
4. None - problem solve with lens case
5. Daily irritation, MD says so
6. high

My Friend

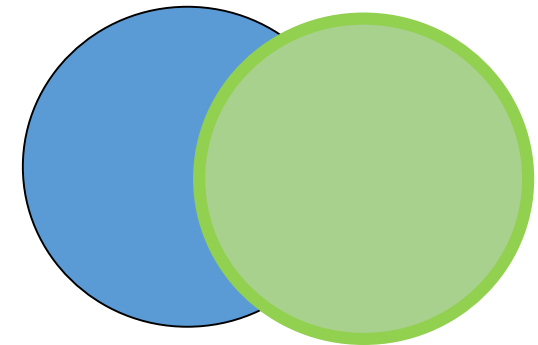
1. Limited concerns, healthy eye exams
2. Low – no concerns
3. Eyes feel better, hate glasses
4. Can't see as well at night, help kids at night
5. Ignores daily cues, notes vision change when needs a pair change, MD says so
6. high

Factors of Motivation: Ambivalence & Discrepancy

Having simultaneous, conflicting feelings toward a person or thing
A normal process of change



“Discrepancy underlies the perceived importance of change (p. 22)... no discrepancy, no motivation.”



Discrepancy between the perception of desired status and current status

#ambivalenceisnormal

#personalmotivationiskey

Motivational Interviewing

- LAYPERSON: “is a collaborative conversation style for strengthening a person’s own motivation and commitment to change.”
- PRACTITIONER: “is a person-centered counseling style for addressing the common problem of ambivalence about change.
- TECHNICAL: “is a collaborative, goal-oriented style of communication with particular attention to the language of change. It is designed to strengthen personal motivation for and commitment to a specific goal by eliciting and exploring the person’s own reasons for change within an atmosphere of acceptance and compassion.

(new) Spirit of MI (PACE)

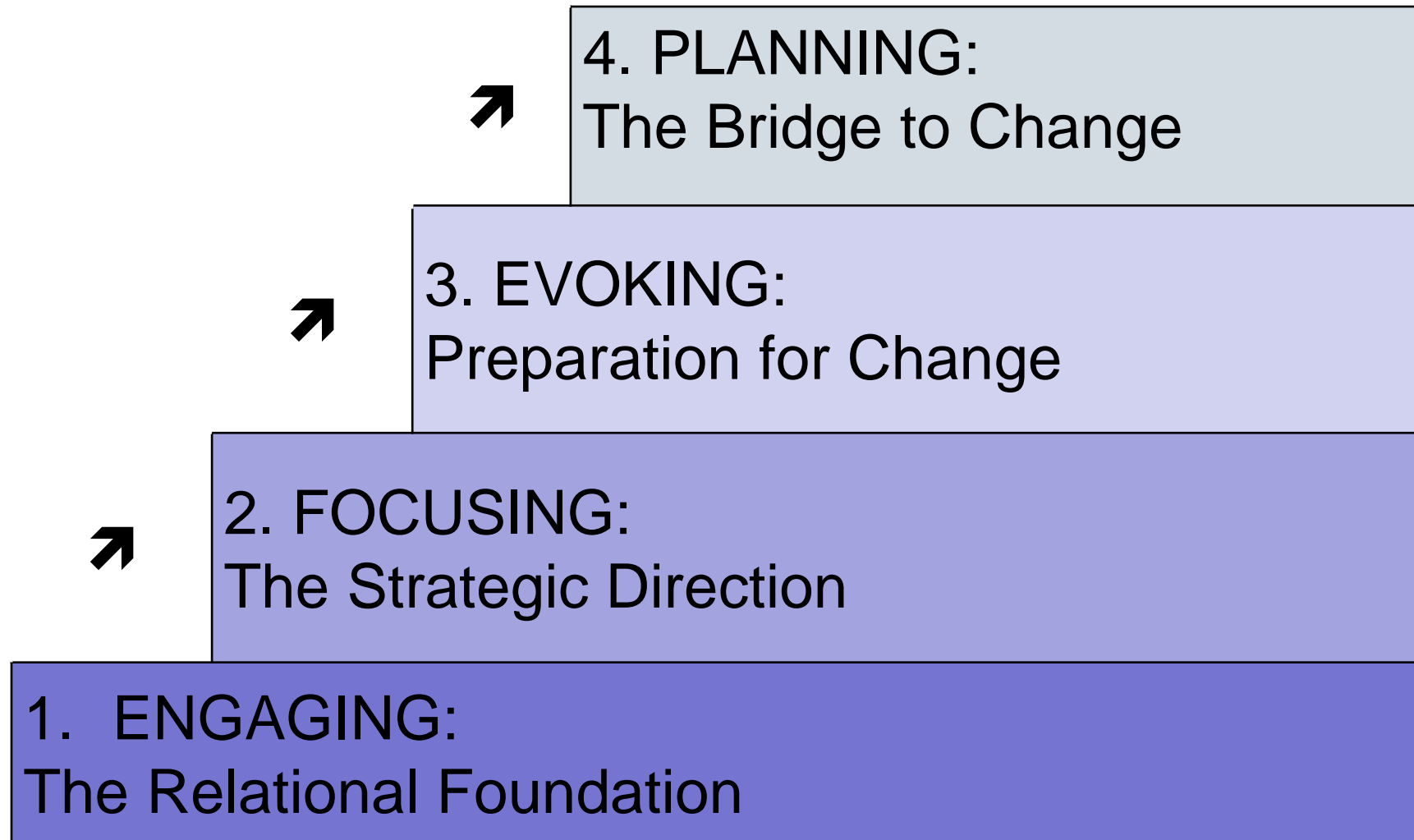
Partnership

Acceptance

Compassion

Evocation

Processes of MI: Respect a person's place



Techniques

Open-ended questions

Affirmations

Reflections

Summaries

Quiets the Righting Reflex

“Those girls were bullying you in between classes? Well, you really need to go talk to the principal immediately when that happens.”

“I can’t believe you stay up until 3am playing video games. That is waste of time; plus, you really need to get your sleep so that you can be at your best at school. I do wish you would make more responsible choices. You won’t be able to have that schedule when you have a real job.”



“I know your meds have some side effects, but you can’t just teak them when you think you need them. Antidepressant medications don’t work like that. They need to be at a therapeutic level, and when you only take them every few days, you’re not at that therapeutic level. You’re getting all the side effects and none of the benefit.”

“You really need to start eating more fruits and laying off the fried food. If you don’t , you are risking a heart attack by the time you are 30.”

#bealistenertofixer

Summary

#begenuine

#bepresent

#reflectionsarepowerful

#openquestions

#ambivalenceisnormal

#personalmotivationiskey

#bealisternotafixer