



Lesson 4 – Communication

Part of the caregiver’s role is being presently active and actively present in many relationships.

Some of these relationships require a specific set of communication skills.

People, including caregivers, tend to assume that good communication skills are something we develop intuitively and while that may be true in many cases, in other specific situations we might need to adapt, update and adjust our existing communication skills or even learn new ones.

When working with caregivers we look at “good communication skills” in term of efficacy – how effective is this person communicating.

Effective communication is a process wherein the intended message is successfully received and understood. The level of efficacy is measured by the response one receives to the message communicated.

Good communication is the most important skill that every caregiver should possess.

Effective communication skills enable the caregiver to know what their care recipient requires, communicate those requirements to other stake holders (medical team, para-medical team, other family caregivers, paid caregivers, family members, friends, and other service providers), to understand information, instructions, requirements, and requests given by other stake holders and communicate them to the care recipient.

Effective communication involves:

1. Active listening
2. Clear statements and requests
3. Acknowledgements
4. Emotional agility
5. Rapport

1. Active Listening

How we listen to others affects the quality of the communication between us, unfortunately research shows that we only remember between 25% - 50% percent of what we hear (Cone of Experience, Edgar Dale).

Active listening skills help us improve our listening and through that improve our communication. It serves the purpose of earning the trust of others and helping understand their situations so that we can each comprehend the other's experience and offer support, empathy and assistance when needed.

Active listening differs from critical listening, in that we are not evaluating the message of the speaker with the goal of defending ourselves or offering an opinion.

Principles of Active Listening:

- Remain neutral and nonjudgmental
- Let go of any need to prepare a response
- Be patient and allow moment of silence
- Respond with verbal and nonverbal feedback to show signs of listening (e.g., smiling, eye contact, leaning in, mirroring)
- Ask questions that are relevant to the topic
- Mirror back what is said
- Ask for clarification when needed
- Summarize

Active listening is the opposite of passive hearing.

2. Clear Statements and Requests

Clear statements and requests focus on the issue and not the person. The purpose is to shift from a reactive state into a proactive state in an assertive way. Being assertive helps us get what we need to get things done. It is NOT aggression and it does not include blame or accusations.

Assertiveness is comprised of:

- Honest open communication
- Shared feelings and thoughts
- Clear and direct statements
- “I” messages

“I” messages –	“You” messages –
<ul style="list-style-type: none"> - Takes ownership of thoughts and feelings - Increases chances of being heard - Keeps conversation positive, on topic and pro-active - Raises a concern - Addresses a problem - Names the issue - Communicates authenticity - States intention and expectations - Expresses good feelings and acknowledgments 	<ul style="list-style-type: none"> - Makes the person feel attacked - Causes the person to respond by “fighting back” or withdrawing - Increases anger and frustration - Often hides behind an “I” message

3. Acknowledgments

Acknowledging is not the same as complimenting.

Acknowledgments address both behavior and the person, indicating s/he has been seen, respected, and validated for the very quality they want to be acknowledged for.

Examples:

<i>Compliments</i>	<i>Acknowledgments</i>
<ul style="list-style-type: none"> • "Good job." 	<ul style="list-style-type: none"> • "Good job on the _____. _____ were very impressed with what you did."
<ul style="list-style-type: none"> • "Thank you for doing _____." 	<ul style="list-style-type: none"> • "Thank you for doing _____. That must've taken a lot of time and effort."
<ul style="list-style-type: none"> • "Dinner was delicious." 	<ul style="list-style-type: none"> • "Dinner was delicious. I haven't had such a good meal in quite some time."
<ul style="list-style-type: none"> • "You look nice." 	<ul style="list-style-type: none"> • "You look nice. The cut and color flatter you."

4. Emotional Agility

The ability to be aware of the emotions we experience, gain self-reflective learnings, and create emotional shifts. These are basic to achieving a place of empowered choice.

Emotional Agility is a skill that can be taught and perfected until it becomes a natural and authentic way of navigating our emotional reality.

The 4 Medical Coaching premises regarding emotions:

1. There are no 'negative' or 'positive emotions'; there are emotions that feel good and emotions that do not.
2. We make a distinction between balanced emotions and imbalanced emotions.
3. In the context of a crisis all emotions are a normal reaction to an abnormal situation.
4. We have emotions – we are not our emotions.

Emotional Agility consists of 3 parts:

1. Understanding the emotion/s I am feeling right now.
2. Creating a clear context and balancing the intensity.
3. Shifting into another state or communicating the emotion using an “I” message.

In the world of care, emotions are an inevitable part of the system. Physical sensations and emotional feelings need to be shared clearly and succinctly in order for the other to understand. Emotions are complex, and yet we generally use oversimplified—and often, inaccurate—language to describe them.

“How are you?”

“I am fine.”

What does that mean?

Does it mean, “I don’t want to talk about it.”? “You wouldn’t understand.”? “I am in pain.”? “I feel fine.”

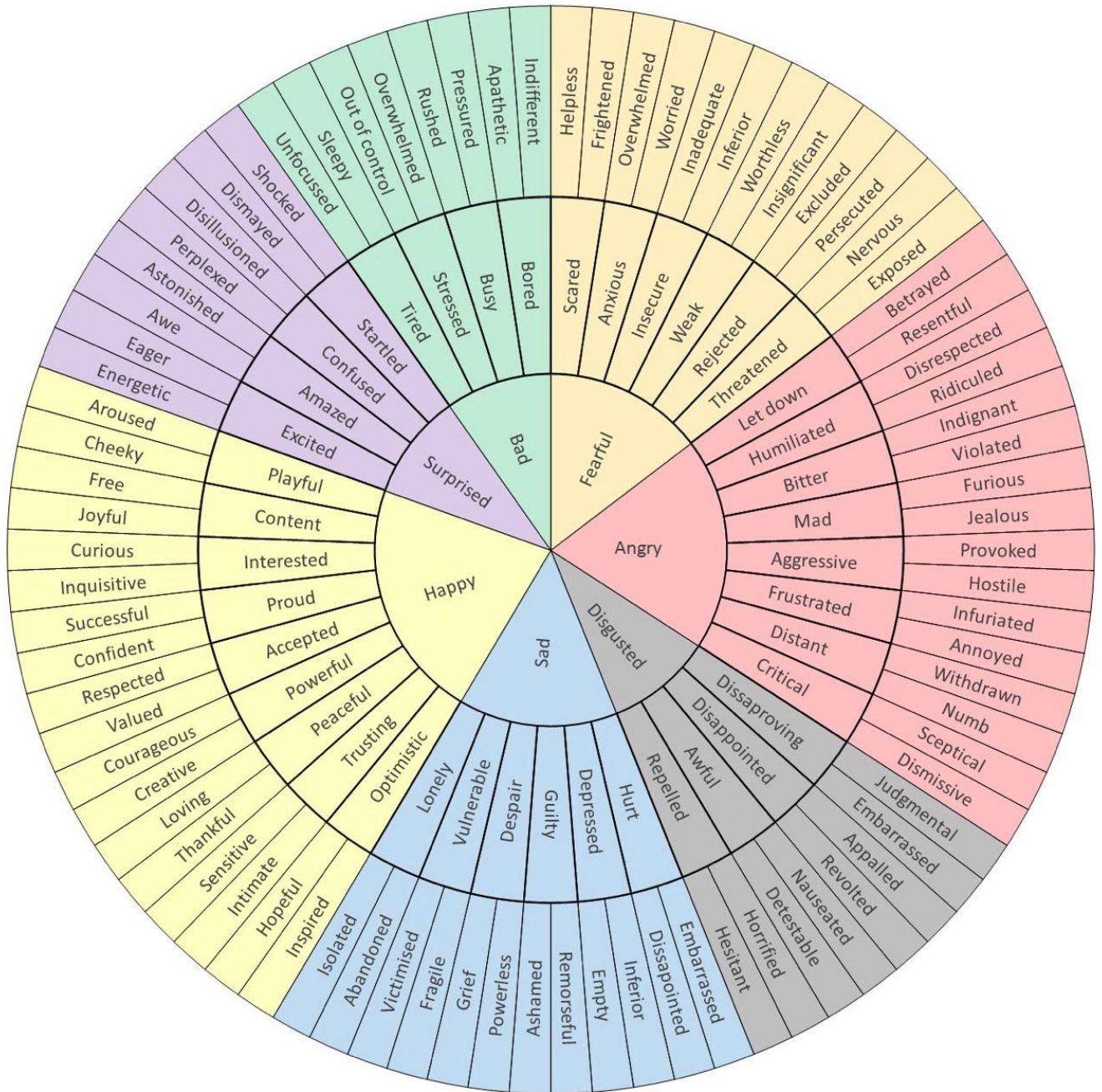
More often than not, the language is short because the person speaking doesn’t really know to express or understand his/her own emotional state.

To start creating awareness about emotions we can use “Feeling Wheels” charts designed to help people quickly and easily identify the specifics of their emotional state.

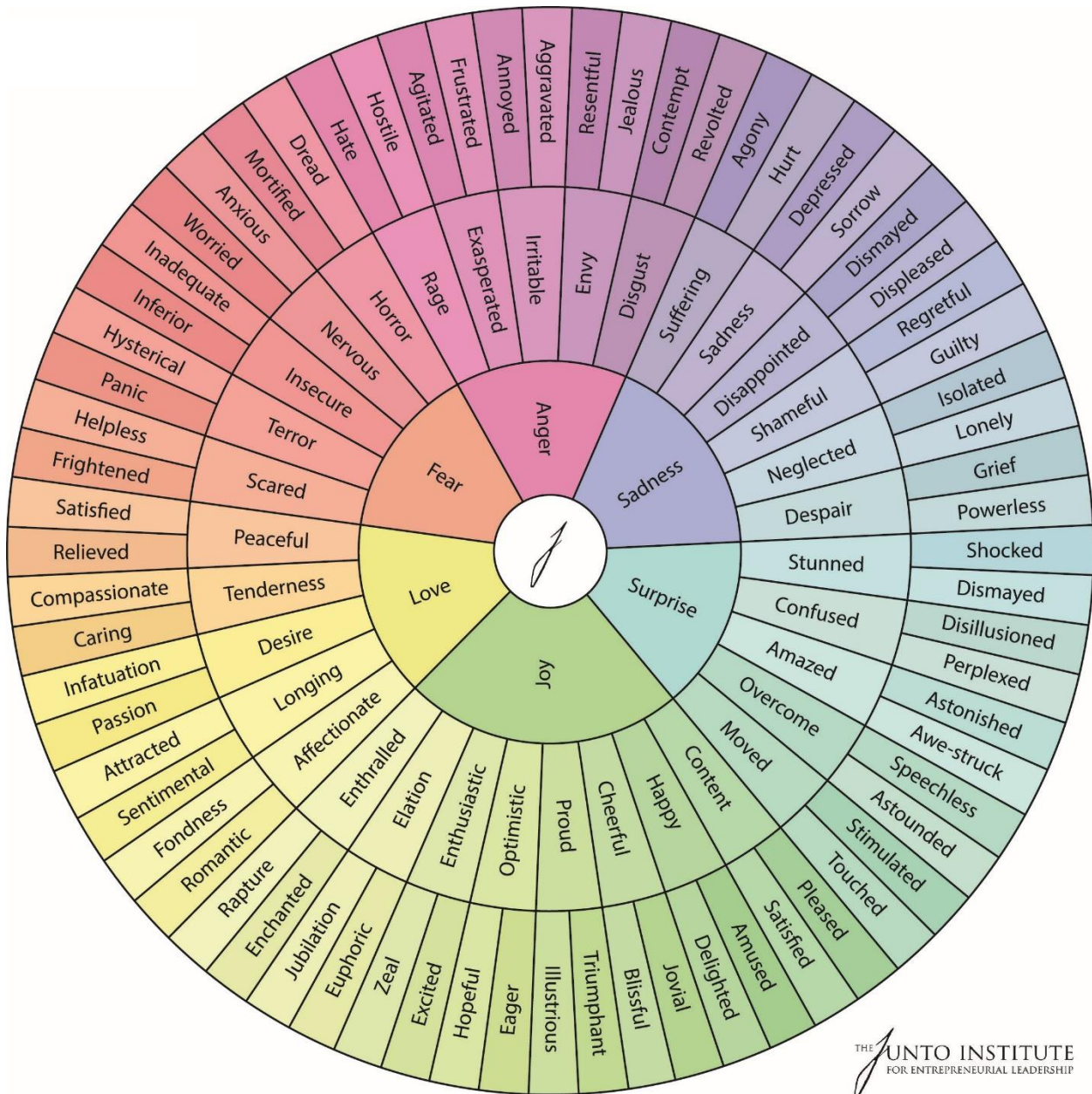
The wheel features three rings, the innermost of which includes six core emotions and the second and third wheels drilling down to the more specific emotions that are derived from them.

Here are two “Feeling Wheels” you can use, they slightly differ in the core emotions, yet the principles are the same.

Gloria Wilcox's "The Feelings Wheel"



The Junto Institute "Emotion & Feeling Wheel"



Susan David's approach of "Umbrellas of Emotions" helps our clients expand their emotional awareness by asking 2 questions:

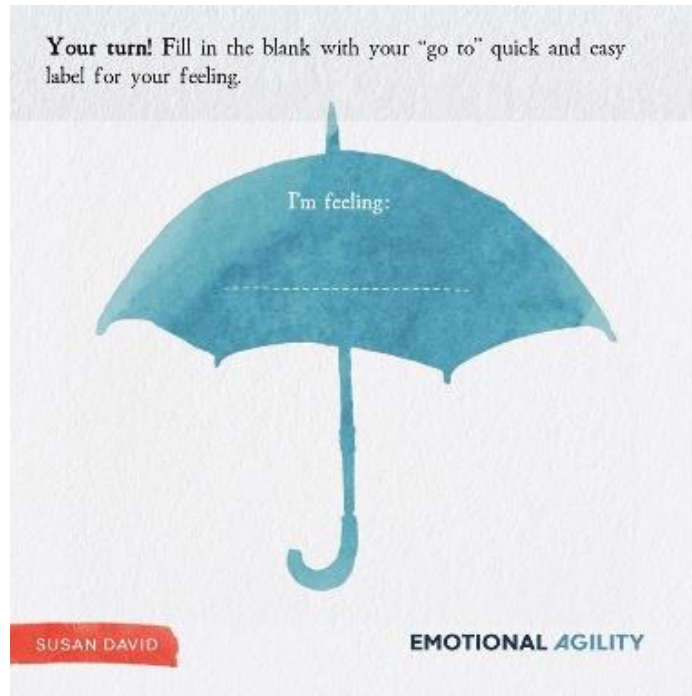
1. What is the "go to" and easy name (label) for what you are feeling now?
2. Pause to carefully consider your emotion. Write the specific terms that describe what you are feeling under the umbrella emotion.

Example:

1. The name of the emotion – Sad
2. Go beyond the obvious umbrella term to identify **exactly how you are feeling:**
Disappointed, regretful, mournful, depressed, disillusioned, tearful, pessimistic, dismayed
1. The name of the emotion – Hurt
2. Go beyond the obvious umbrella term to identify **exactly how you are feeling:**
jealous, isolated, betrayed, shocked, victimized, deprived, tormented, abandoned.
1. The name of the emotion – Anxious
2. Go beyond the obvious umbrella term to identify **exactly how you are feeling:**
Afraid, confused, stressed, vulnerable, skeptical, worried, cautious, nervous.
1. The name of the emotion – Angry
2. Go beyond the obvious umbrella term to identify **exactly how you are feeling:**
Frustrated, grumpy, furious, annoyed, defensive, irritated, offended, disgusted, spiteful.
1. The name of the emotion – Happy
2. Go beyond the obvious umbrella term to identify **exactly how you are feeling:**
Thankful, trusting, content, comfortable, excited, relieved, elated, confident.

You can use Susan David's umbrella metaphor and cards to help your client –

Your turn! Fill in the blank with your "go to" quick and easy label for your feeling.



I'm feeling:

SUSAN DAVID

EMOTIONAL AGILITY

This card features a teal watercolor-style umbrella illustration. The text "I'm feeling:" is centered above a horizontal dashed line that spans the width of the umbrella's canopy. The author's name "SUSAN DAVID" is in a red box at the bottom left, and "EMOTIONAL AGILITY" is at the bottom right.

Next, pause to carefully consider your emotion. Write the specific terms that describe what you're feeling under the umbrella emotion.



Accurate labeling is the first step of

EMOTIONAL AGILITY

SUSAN DAVID

This card features the same teal watercolor-style umbrella illustration. Below the umbrella, there are three horizontal dashed lines on the left and three on the right, providing space for writing. The text "Accurate labeling is the first step of" is positioned above "EMOTIONAL AGILITY" at the bottom right. The author's name "SUSAN DAVID" is in a red box at the bottom left.

5. Rapport

Rapport is the ability to relate to others and interact in a way that creates trust and understanding.

Rapport is often described as a feeling of commonality, being in sync or being on the same wavelength/page with someone.

Theory:

- A. Communication is 7% verbal and 93% non-verbal.
- B. When people are like each other, they like each other.

Process:

Creating Rapport is a process of responsiveness, not necessary “liking”.

We do this by:

- A. Subtly Matching & Mirroring non-verbal communication on one or more of the following levels:

1. **Physiology:**

- Posture
- Facial expressions
- Head position
- Smiling/frowning
- Eyebrow movement
- Body lean

2. **Breathing rate / patterns / shifts**

3. **Tone and volume of voice:**

- Audio tonal changes during answer
- Time for processing answers
- Pace, speed and tempo

4. **Vocabulary:**

- Metaphors
- Language or jargon

- B. Developing a genuine interest in the other person and in the way he/she sees and experiences the world.

Practical Models of Communication:

Assertive Communication– getting things done

- *Describe* the situation
- *Express* feelings
- *Specify* what needs to be done
- *Consequences* need to be spelled out

Aikido Communication – this model of communication is based on the principles of Aikido and helps the communicators find the common ground and create a sense of harmony while bearing in mind the principles of the art of peace (reframing, non-judgement, curiosity & inquiry, & appreciation)

- *Align* – put yourself in the other’s shoes
- *Agree* – find common ground
- *Redirect energies* – focus on areas of agreement
- *Resolve problems* – agree on solution



Additional resources on Aikido Communication:

The Aikido of communication - <https://completewellbeing.com/article/the-aikido-of-communication/>

Conflict, Creativity, and Compassion: Aikido Principles in Work and Life - <https://www.youtube.com/watch?v=gnZa1W52I58>

Non-Violent Communication (NVC) – inspiring compassion and responding compassionately to others and to ourselves. These are the four principles of NVC:

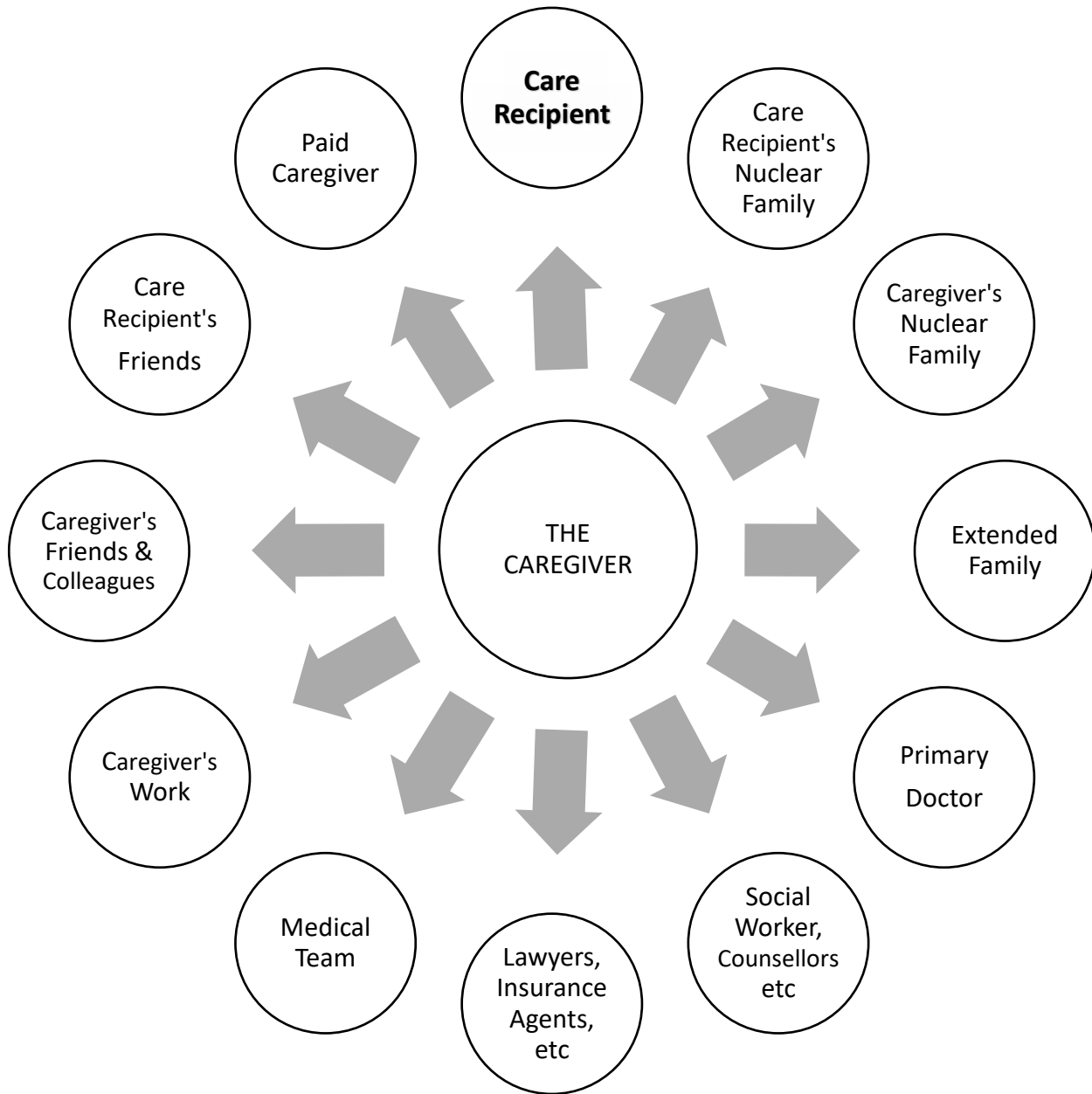
- *Observations* – watching/looking carefully to gain information
- *Feelings* - emotions
- *Needs* – (e.g. Connection, Physical Well-Being, Honesty, Autonomy, Meaning)
- *Requests* - asking for something to be given or done

Using the Non-Violent Communication Process

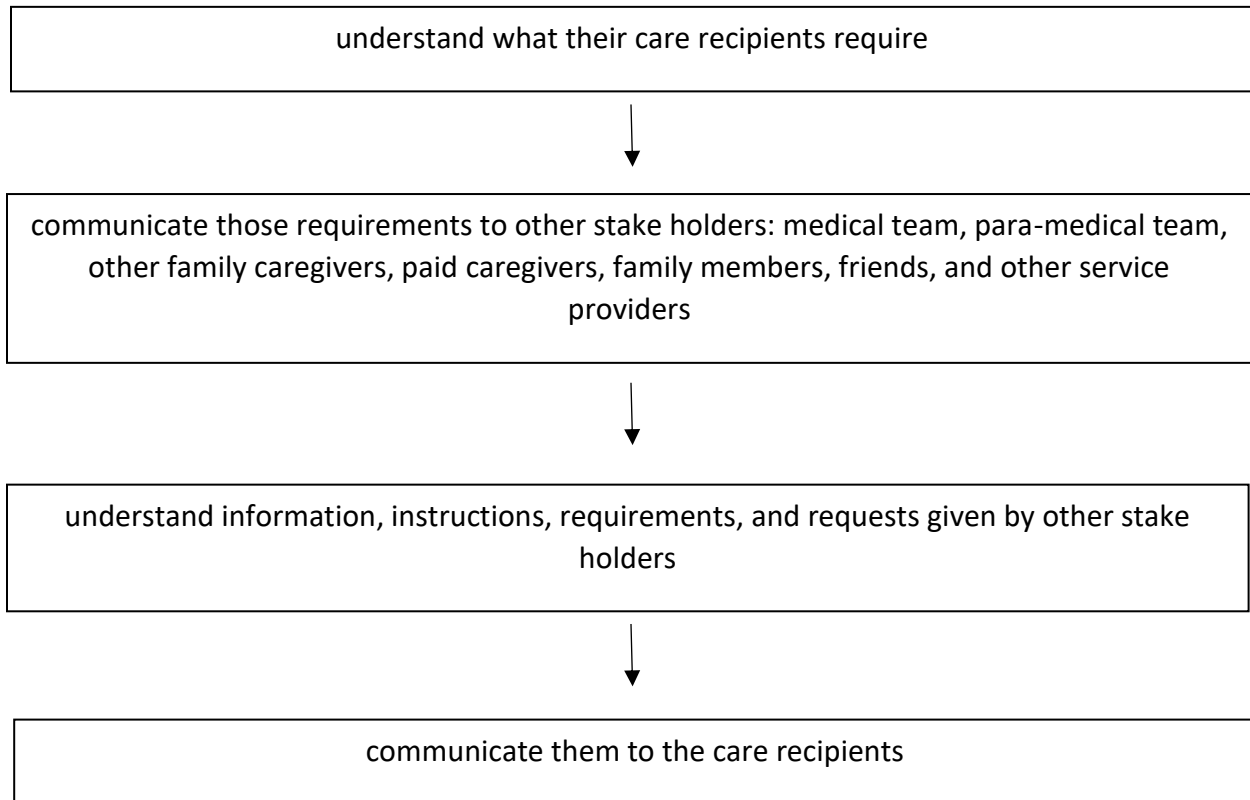
(based on the Center for Non-Violent Communication - <https://www.cnvc.org/learn-nvc/what-is-nvc>)

Clearly expressing how I am without blaming or criticizing	Empathically receiving how you are without hearing blame or criticism
OBSERVATIONS	
What I observe (<i>see, hear, remember, imagine, free from my evaluations</i>) that does or does not contribute to my well-being: “When I (<i>see, hear</i>) ...”	What you observe (<i>see, hear, remember, imagine, free from my evaluations</i>) that does or does not contribute to your well-being: “When you (<i>see, hear</i>) ...”
FEELINGS	
How I feel (<i>emotion or sensation, rather than thought</i>) in relation to what I observe: “I feel...”	How you feel (<i>emotion or sensation, rather than thought</i>) in relation to what you observe: “You feel...”
NEEDS	
What I need or value (<i>rather than a preference, or a specific action</i>) that causes my feelings: “...because I need/value...”	What you need or value (<i>rather than a preference, or a specific action</i>) that causes your feelings: “...because you need/value...”
REQUESTS	
The concrete actions I would like taken: “Would you be willing to...?”	The concrete actions you would like taken: “Would you like...?”

The Caregiving Communication Matrix



Caregivers need to be able to communicate masterfully as they:



Caregivers need to communicate both for and to their care recipients. At times this needs to be done regardless of what the caregivers think or feel. Caregivers must deal with their thoughts and their feelings as they relate to what is happening as well as what is relative to all the people and positions in the caregiving circle. In other words, they need to deal with how they feel about the illness or injury, the care recipient and the change in the relationship, doctors and hospitals, family members, friends, work, and so much more. This is a continual process, of which there can be growth, stagnation, and/or decline. Whilst that work is being done, there must be communication.



Examples of communication issues that might be addressed in the matrix:

- Caregiver & Care Recipient –
 - Feelings between the two from before the caregiving relationship began
 - Feelings about the relationship changing
 - Dealing with grief as to whom the Caregiver and/or care recipient was and might never be again
 - Dealing with hopes and dreams changing

- Caregiver & Doctor –
 - Understanding the illness
 - Preparing for the session with the doctor
 - The family caregiver becoming the care recipient's "nurse"

- Caregiver & place of work
 - Letting employer know what is going on
 - Making appropriate arrangements & decisions as the situation changes

- Caregiver & family –
 - Family intrigues, stories, and teams
 - Caregiver's other responsibilities and/or desires
 - Shared responsibilities
 - Teamwork
 - End of life

Caregivers need to be able to regulate their emotions and to be present fully and fully present. They need to be able to address and communicate with each member of the matrix.

Communication by Amy

“Communication takes practice,
it's never perfect,
sometimes not patient,
sometimes not kind,
but you have to say
what's on your mind.

Lend an ear,
listen not just hear,
to the ones
you love so dear.

Communication is not
a one way street,
it takes two,
to concur this feat.

Communication is hard you see,
but in the end, it is key,
to that great relationship,
we all want and need.

Open your heart,
say what's on your mind,
When you are partners for life
there's nothing to hide”