



A photograph of a breakfast table setting. In the foreground, a white plate holds a charcuterie board with sliced meats, cheeses, and crackers. To the left is a white coffee cup on a saucer. In the center, a glass of red juice sits next to a small bowl of jam. The background shows a dining table with white plates and orange chairs, slightly out of focus.

Difficult Conversations:
A breakfast scenario

MSHA Student Round Table
March 24, 2022

Plan and prepare for the meal



Characteristics of a Profession

(Tipton, 2017)

- Mastery of a body of knowledge
- High levels of autonomy
- A code of behavior
- A social contract to do good for the individual and society

Characteristics of a Professional

(Tipton, 2017)

Accountability	to patients in fulfilling the covenants or the patient-provider relationships; to society's health needs; and to the profession for honoring codes of conduct
Altruism	willingness to serve the best interest of the patient rather than one's self-interest
Excellence	conscientious commitment to improvement
Duty	commitment to serve the patient even when it is inconvenient
Honor and Integrity	commitment to the highest standards of behavior
Respect for others	belief in the value of all humans beings, including patients, families, and other healthcare providers

Values and Ethics

Values give meaning to our lives. Directional signals that guide our thoughts, decisions and actions.

Values are attitudes and beliefs put in to practice in our daily lives.

Learning values and ethics is a life-long process.

Learners need to internalize values, moral, ethics, to make the best decisions for ethical practice.

The goal of ethical practice is *to do the right thing for the right reason*.

There are often many “right” actions or choices; difficulty is selecting the best one for the given situation.

Values and Ethics

Need to “know thyself” – what are the basic values that generally guide your actions and choices on a daily basis?

Self-awareness of values is essential to our professional practice and to clinical education.

Knowing our values help us understand what is important, what is meaningful, and what ideas are worthy/appropriate/correct.

Welcome your guests and begin to engage



Engagement through ethnographic interview

Create an environment in which you can:

- provide counseling/education regarding communication disorders
- gain insight/understanding of the needs and backgrounds of our clients
- establish a trusting relationship with clients/families

Engagement through ethnographic interview

Requires

- active listening

“If we listen carefully, the client will tell us what is needed” (Luterman, 2017, p. 92).

- sensitivity to personal/cultural/linguistic styles → yields trust and respect
- flexibility in the approach to questioning and responding to information shared

Ethnographic Interviewing, ala Westby

“... helping the interviewer understand the social situations in which families exist, and how the families perceive, feel about, and understand these situations.” (Westby, 1990)

Get to know your guests



Support “Telling the Story”

(Tellis, C.M. & Barone, O.R., 2018)

Learn what you can about the individual and their care partners

Observe the attitudes, emotions, thoughts and beliefs that *may* mean something

words, facial expressions, gestures, body posture, eye contact, shake/nod of the head, etc.

Study and Reflect on the information provided; think about its importance to your work.

Listen: This is essential to your understanding “the story”

Develop the Circle of Power

(Tellis, C.M. & Barone, O.R., 2018)

Identify allies who will provide a support network for the client

Those on the client's/patient's "side"

Those who can be a positive support for the client's progress;
invested/motivated in the ***client's/patient's best interests***

Counseling in Communication Disorders: A Wellness Perspective

(Holland, A. 2007)

Interviewing . . . the skill of finding out about another (in this case, someone with a communication disorder or a family member) through perceptive questioning and observation” (p 12).

Counseling is, above all, a listening process” (p 12).

The goal of the counseling process is to help individuals and families to live as successfully as they possibly can, despite the intrusion of” . . . a catastrophic event that results in a communication disorder (p.12).

Counseling in Communication Disorders

For the counselor . . .

To receive information that the individual and family wish to share

To give information

To help individuals clarify their ideas, attitudes, emotions and beliefs

To provide options

From Webster (1977), in Holland (2007)

Counseling in Communication Disorders

(Luterman, 2017)

“Counseling seeks to empower clients by moving the locus of control in an inward direction” (p.100).

“The attitude we must convey to clients is that they are capable and that they have control of many aspects of their lives” (p. 102).

“The parent or client knows much more of the really important data to make life decisions, and I have learned, although at times it has been painful to my professional ego, to trust people to make their own decisions. I figure that they know what is best for them” (p. 109).

Intent of counseling w/ person who is communicatively impaired and his/her family (Holland, 2007)

- ***To grieve*** what has been lost
- ***To understand*** what has happened as fully as possible
- ***To develop coping strategies/increase resilience***
- ***To make peace*** with the disorder
- ***To make sensible adaptations*** to the disorder
- ***To capitalize on strengths***, no minimize weakness
- ***To live as fully as possible***, despite impairment

Discuss the plan for next time and depart



Clear the table and reflect



Good Counselors: Knowledge, Skills, Characteristics, Attitudes (Holland, 2007)

Are you able to :

- Reveal yourself to others
- Be in touch with your feelings/capabilities
- Regard each person as unique
- See differences as learning opportunities, not threats or signals for conflict
- Understand clients for who they are, not how you wish them to be
- Understand that clients are responsible for their own behaviors

Good Counselors: Knowledge, Skills, Characteristics, Attitudes (Holland, 2007)

Are you a good communicator?

Are you able to listen comfortably to people who have trouble talking?

Can you listen to emotions (anger, frustration, anxiety)?

Can you listen to ideas that conflict with your values?

Are you sensitive to cultural differences?

Good Counselors: Knowledge, Skills, Characteristics, Attitudes (Holland, 2007)

Are you optimistic and positive?

Do you have a good sense of humor?

Are you flexible?

Can you see beyond the obvious?

Do you know yourself? Do you like yourself?

Do you like challenges?

EMPATHY TEDx Talk <https://www.youtube.com/watch?v=baHrcC8B4WM>

Helen Riess, Associate Professor of Psychiatry at Harvard Medical School. Published Dec 12, 2013

Eye contact

Muscles of facial expression

Posture

Affect

Tone of voice

Hearing the “whole person”

Your response

Words from a working professional (edited)

- [Keep] in mind the experience that each individual brings to the table (that we aren't necessarily aware of).
- The conflict at hand may seem as though it's regarding “xyz”, but if we actively listen, it's likely something deeper.
- Giving clients/families the space to share openly and be heard may just be what they need to get to a place mentally to receive difficult news or to accept assistance for themselves or a loved one.
- We aren't necessarily going to be able to solve each perceived problem, but we can listen and provide resources.
- In the acute and home care settings, giving difficult medical news and family issues are so prevalent.