Professional Communication Skills for Health Studies

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Health Studies

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Preface

Welcome to “Professional Communication in Health Studies.” This book is designed to introduce fundamental communication principles and practices that are critical to success as a healthcare professional. Effective communication is essential in healthcare settings, where it can profoundly impact client outcomes, team dynamics, and organizational culture.

Communication is essential to human interaction, and its significance cannot be overstated. Effective communication is the foundation of every successful personal or professional relationship. Communication involves exchanging information, understanding, interpreting, and responding to the message. Communication is a complex process that involves verbal and nonverbal cues, emotions, and cultural nuances.

This book aims to provide a comprehensive overview of various communication theories, strategies, and techniques. It covers therapeutic communication, verbal and nonverbal communication skills, self-awareness, perception, leadership, listening, interviewing, interprofessional communication, small group communication, conflict management, and cultural competence.

By the end of this book, you will have a deeper understanding of communication theory and the skills necessary to communicate effectively in various healthcare settings. You will also be equipped with strategies for managing conflict and building relationships with colleagues from diverse backgrounds. Whether you are a health care provider, administrator, or student, this book will provide the tools to communicate confidently and professionally to build better relationships, achieve your goals, and succeed personally and professionally.

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CHAPTER 1: FOUNDATIONS FOR UNDERSTANDING COMMUNICATION IN HEALTH STUDIES

Communication has been called the most practical of academic courses and health disciplines. Although you may never have taken a communication studies course, you have a lifetime of experience communicating. This experiential knowledge provides a foundation and a starting point from which you can build the knowledge and practice the skills necessary to become a more competent, ethical communicator within your given health profession. You are a communication scholar, and we are pleased to welcome you to start your professional communication journey. Whether you stay on this path for a semester or for much longer, studying interpersonal communication has the potential to enrich your personal and professional lives in many ways. In this chapter, we will explore communication theories, principles, strategies to achieve communication competence, and principles of professional communication.

1.1 Communication: Types and Forms

Learning Objectives

- Define communication.
- Explain intrapersonal, interpersonal, and group communication.
- Explain types and forms of communication.

Talking to or texting someone might come to mind first when you think of communication. However, while talking and texting are communication delivery methods, they do not represent a comprehensive definition of communication.

A more comprehensive understanding of communication refers to sharing information, ideas, and feelings, typically aimed at **mutual understanding**. In this way, you must consider the sender, the recipient, and the transaction. Simply put, the sender is the person sharing the message, the recipient is the person receiving and interpreting the message, and the transaction is how the message is delivered and the factors that influence the context and environment of the communication. As you can see, communication is a complex process. It involves more than just what you say, as reflected in Figure 1.1.1, where communication between mother and baby occurs via touch rather than words.



Figure 1.1.1 Communication between mother and child occurs by touch rather than words.

Client communication involves verbal, nonverbal and written communication (Ogbogu, et al., 2022).

Verbal communication

- Verbal communication is **oral communication** through spoken words, sounds, vocal intonation, and pace. It can occur face-to-face, one-on-one or in groups, over the telephone, or via video conferencing (Ratna, 2019). As a health studies student, you might communicate verbally with clients, families, colleagues, and interprofessional teams.

Nonverbal communication

- **Nonverbal communication** is a type of communication that occurs through **facial expressions, eye contact, gestures,** and **body positions** and **movements** (Ratna, 2019). As a health studies student, you will learn that nonverbal communication is important because it can reinforce or contradict what is said verbally. Additionally, nonverbal communication is used more often than verbal communication. Thus, you must become aware of your

nonverbal communication.

Written communication

- **Written communication** is a type of communication that occurs through **written words, symbols, pictures,** and **diagrams**. You are probably familiar with some informal, written types of communication, such as texting or emailing someone, posting a picture on Instagram, or using an emoji on Twitter. You may also have engaged in more scholarly forms of written communication, such as letters and papers. In health studies, written communication involves legal documentation and scholarly writing, such as essays, peer-reviewed publications, protocols, practice standards, and best practice guidelines.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=31#h5p-1

Forms of Communication

Forms of communication vary in terms of participants, channels used, and contexts. The five main forms of communication are intrapersonal, interpersonal, group, public, and mass communication. This resource introduces you to intrapersonal, interpersonal, and group communication. In the following sections, we will discuss the similarities and differences between each form of communication, including their definitions, level of intentionality, goals, and contexts.

Intrapersonal Communication

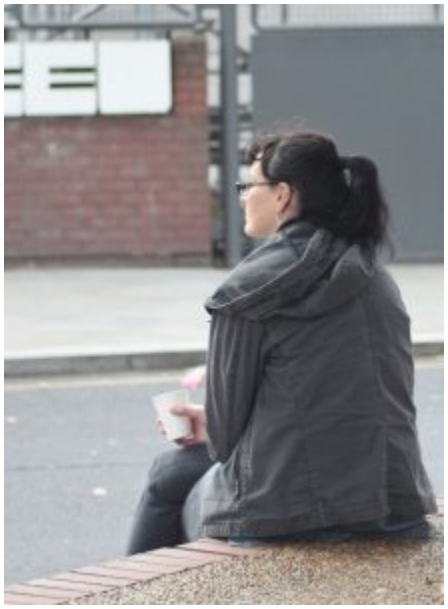


Figure 1.1.2. Intrapersonal communication is communication with ourselves that takes place in our heads.

Intrapersonal communication is communication with oneself using internal vocalization or reflective thinking. Like other forms of communication, intrapersonal communication is triggered by internal or external stimuli. We may, for example, communicate with ourselves about what we want to eat due to the internal stimulus of hunger, or we may react intrapersonally to an event we witness. Unlike other forms of communication, intrapersonal communication occurs only inside our heads. The other forms of communication must be perceived by someone else as communication. So what is the point of intrapersonal communication if no one else even sees it?

Intrapersonal communication serves several social functions. Self-talk acts of imagination, visualization, and even recall and memory can help us achieve or maintain social adjustment (McLean, 2005). For example, a person may use self-talk to calm themselves down in a stressful situation, or a shy person may remind themselves to smile during a social event. Intrapersonal communication also helps

build and maintain our self-concept. We understand who we are based on how other people communicate with us and how we process that communication intrapersonally. The shy person in the earlier example probably internalized shyness as a part of their self-concept because other people associated their communication behaviours with shyness and may have even been labelled as “shy” before they had a firm grasp on what that meant. We also use intrapersonal communication or “self-talk” to let off steam, process emotions, think through something, or rehearse what we plan to say or do. As with the other forms of communication, competent intrapersonal communication helps facilitate social interaction and enhance well-being.

Sometimes we intrapersonally communicate for the fun of it. I am sure we have all had the experience of laughing aloud because we thought of something funny. We also communicate intrapersonally to pass the time. There is a lot of intrapersonal communication in waiting rooms and meeting rooms worldwide right now. In these cases, intrapersonal communication is usually unplanned. We can, however, engage in more intentional intrapersonal communication. Deliberate self-reflection can help us become more competent communicators as we become more mindful of our behaviours. For example, an individual’s internal voice may praise or scold based on a feeling, thought or action.

Interpersonal Communication

Interpersonal communication is communication between people whose lives mutually influence one another. Interpersonal communication builds, maintains, and ends our relationships, and we spend more time engaged in interpersonal communication than in other communication forms. Interpersonal communication occurs in various contexts and is addressed through intercultural, organizational, health, and computer-mediated communication. After all, interpersonal relationships exist in all those contexts.



Figure 1.1.3. Interpersonal communication is interactive. Two friends are looking at each other as they talk.

Interpersonal communication can be planned or unplanned, but since it is interactive, it is usually more structured and influenced by social expectations than intrapersonal communication. Interpersonal communication is also more goal-oriented than intrapersonal and fulfills instrumental and relational needs.

- Instrumental needs are focused on the goal of achieving a specific outcome. For example, you may speak with your roommate about what to cook for dinner or speak with a professor about how to position yourself for success in a course.
- Relational needs are focused on the goal of evolving a relationship or communicating the uniqueness of a specific relationship. This goal usually involves meeting a person's needs and the parties' shared needs. For example, two colleagues may have a conversation to resolve a conflict they have been having.

To be a competent interpersonal communicator, you should demonstrate effective conflict management skills and listening skills, among others, to maintain positive relationships.

Group Communication

Group communication is communication among three or more people to achieve a shared goal. You have likely worked in groups in high school or university; if you are like most students, you did not enjoy it. Even though it can be frustrating, group work in an academic setting provides useful experience and preparation for group work in professional settings. Organizations have been moving toward more team-based work models, and whether we like it or not, groups are an integral part of people's personal and professional lives. Therefore the study of groups and group communication is valuable in many contexts.



Figure 1.1.4. Since many businesses and organizations are embracing team models, learning about group communication can help these groups be more effective.

Group communication is more intentional and formal than interpersonal communication. Unlike interpersonal relationships, which are voluntary, individuals in a group are often assigned to their position within a group. Additionally, group communication is often task-focused, meaning that group members work together for an explicit purpose or goal that affects each group member.

From previous experience working in groups, you likely know that having more communicators usually leads to more complicated interactions. Some of the

challenges of group communication relate to task-oriented interactions, such as deciding who will complete each part of a larger project. But many challenges stem from interpersonal conflict or misunderstandings among group members. Since group members also communicate with and relate to each other interpersonally and may have preexisting relationships or develop them during group interaction, elements of interpersonal communication occur within group communication too. As you enter the professional world, you will probably be on a work "team," a specialized group. In other words, group communication is a part of life.

Key Takeaways

Communication generates meaning by sending and receiving symbolic cues influenced by multiple contexts. There are three types of communication: verbal, nonverbal, and written.

- Three forms of communication are relevant to health studies: intrapersonal, interpersonal, and group communication.
    - Intrapersonal communication is communication with oneself and occurs only inside our heads.
    - Interpersonal communication is communication between people whose lives mutually influence one another and typically occurs in dyads, which means in pairs.
    - Group communication occurs when three or more people communicate to achieve a shared goal.

Exercises

1. Write down your definition of communication. How does your definition differ from the definition in this book? How does it differ from other peers in class? Why did you choose to define communication the way you did?

2. Over a day, keep track of the forms of communication that you use. Make a pie chart of how much time you spend on an average day engaging in each form of communication (intrapersonal, interpersonal, or group).

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Ratna, H. (2019). The importance of effective communication in healthcare practice. *Harvard Public Health Review, 23*, 1-6. https://doi.org/10.54111/0001/W4

Image Attributions

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Figure 11..3. The Moment by Trung Thanh. Licensed under Unsplash.

Figure 1.1.4. Team by RSNY. Licensed under CC BY-NC-ND 2.0.

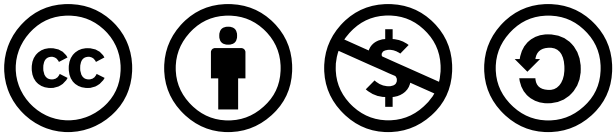
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1.2 The Communication Process

Learning Objectives

- Explain the components of the transmission model of communication.
- Explain the components of the interaction model of communication.
- Explain the components of the transaction model of communication.
- Compare and contrast these three models of communication.

Communication is a complex process, and it is difficult to determine where or with whom a communication encounter starts and ends. Models of communication simplify the process by providing a visual representation of the various aspects of a communication encounter. Some models explain communication in more detail than others, but even the most complex model does not recreate what we experience in a momentary communication encounter. However, models still serve a valuable purpose for communication students because they allow us to see specific concepts and steps within the communication process, define communication, and apply it. When you become aware of how communication functions, you can think more deliberately through your communication encounters, which can help you better prepare for future communication and learn from the previous communication. The three communication models are the transmission, interaction, and transaction models.

Although these models of communication differ, they contain some common elements. The transmission model and the interaction model include the following parts: participants, messages, encoding, decoding, and channels. In communication models, the participants are the senders and receivers of messages in a communication encounter. The message is the verbal or nonverbal content

conveyed from sender to receiver. For example, when you say “Hello!” to your client, you are sending a message of greeting that the client will receive.



Figure 1.2.1. Even the most complex communication model does not capture what communication is like as it is experienced.

The internal cognitive process that allows participants to send, receive, and understand messages is the encoding and decoding process. Encoding is the process of turning thoughts into communication. As we will learn later, the level of conscious thought that goes into encoding messages varies. Decoding is the process of turning communication into thoughts. For example, you may realize you are hungry and encode the following message to send to your roommate: “I’m hungry. Do you want to get pizza tonight?” As your roommate receives the message, they decode your communication and turn it back into thought to make meaning out of it. Of course, we do not just communicate verbally — we have various options or channels for communication. Encoded messages are sent through a channel, or a sensory route on which a message travels, to the receiver for decoding. While communication can be sent and received using any sensory route (sight, smell, touch, taste, or sound), most communication occurs through visual (sight) and auditory (sound) channels. If your client has earbuds in and is engrossed

in a phone call, you may need to get their attention by waving your hands before asking them to end the call.

Transmission Model of Communication

The transmission model of communication describes **communication as a linear, one-way process** in which a sender intentionally transmits a message to a receiver (Adler et al., 2020; Ellis & McClintock, 1990). This model focuses on the sender and the message within a communication encounter. Although the receiver is included in the model, this role is viewed as more of a target or end point rather than part of an ongoing process. We are left to presume that the receiver either successfully receives and understands the message or does not. The scholars who designed this model expanded on a linear model proposed by Aristotle centuries before that included a speaker, message, and hearer. They were also influenced by the advent and spread of new communication technologies such as telegraphy and radio (Shannon & Weaver, 1949); you can probably see these technical influences within the model. Think about how a radio message is sent from a person in the studio to you listening in your car. The sender is the radio announcer who encodes a verbal message transmitted by a radio tower through electromagnetic waves (the channel) and eventually reaches your (the receiver's) ears via an antenna and speakers to be decoded. The radio announcer does not know if you received his or her message, but if the equipment is working and the channel is free of static, then there is a good chance that the message was successfully received.

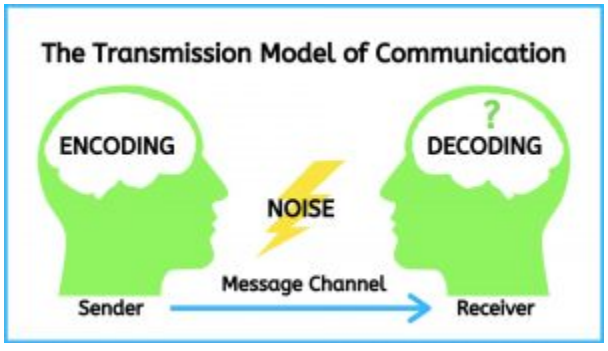


Figure 1.2.2. The transmission model of communication. Image Description (see Appendix A 1.2.2).

Because this model is sender- and message-focused, **responsibility is put on the sender** to ensure the message is successfully conveyed. This model emphasizes clarity and effectiveness but acknowledges barriers to effectively sending communication. **Noise** is anything that interferes with a message being sent between participants in a communication encounter. Even if a speaker sends a clear message, noise may interfere with a message being accurately received and decoded. The transmission model of communication accounts for environmental and semantic noise.

- **Environmental noise** is any physical noise present in a communication encounter. Other people talking in a crowded room or hallway could interfere with your ability to transmit a message and have it successfully received and decoded.
- **Semantic noise** refers to interference in the encoding and decoding process, resulting in different interpretations of what is being communicated (e.g., lack of understanding, clarity, and confusion of words and meanings). To use a technical example, a health studies student may tell a client that they should progress their walking time to 60 minutes daily. However, the client's interpretation of this could be influenced by uncertainty surrounding how fast to walk, how quickly to progress to 60 minutes per day, and whether these 60 minutes should occur simultaneously.

Health Studies Example

A client is seeking care for a suspected urinary tract infection. A healthcare worker communicates to the client that they must provide a urine sample and fully empty their bladder. The healthcare worker speaks quietly to maintain confidentiality because the client is sitting near a waiting room full of people. The client provides a urine sample but does not follow the proper sample collection technique.

Analysis: In this case, the message was successfully sent to the client, as evidenced by the client's action and response to the request. The interference of environmental noise (health care worker speaking softly) and semantic noise (health care worker not providing complete instructions) affected how the message was decoded and, ultimately, the accuracy of the urine sample results.

Pros: This model spotlights the sender and the possible noise affecting communication transmission.

Cons: This model is limited because it privileges *how* the sender communicates, with little attention paid to how the message is received. It is also limited in terms of the message because it simply evaluates whether or not it was delivered. The example above illuminates how detail and nuance should be addressed when communicating.

Although the transmission model may seem simple or even underdeveloped to us today, the creation of this model allowed scholars to examine the communication process in new ways, eventually leading to more complex models and theories of communication that we will discuss later. This model is not quite rich enough to capture dynamic face-to-face interactions, but there are instances in which communication is one-way and linear, especially **computer-mediated communication (CMC).** This is integrated into many aspects of our lives now, and while it has opened up new ways of communicating, it has also brought some new challenges. Think of text messaging, for example. The transmission model of communication is well suited for describing the act of text messaging since the sender is not sure that the meaning was effectively conveyed or that the message was received. Noise can also interfere with the transmission of a text message. If you use an abbreviation the receiver does not know, or the phone autocorrects to something completely different than you meant, then semantic noise has interfered with message transmission.

Many of you reading this book probably cannot remember a time without CMC. If that is the case, you are what some scholars call “digital natives.” When you take a moment to think about how, over the past 20 years, CMC has changed how we teach and learn, communicate at work, stay in touch with friends, initiate relationships, search for jobs, manage our money, get our news, and participate in our democracy, it is amazing to think that all of those things used to take place without computers. But the increasing use of CMC has also raised questions and concerns, even among those of you who are digital natives. Many students are interested in studying the effects of CMC on our personal and professional lives and relationships. This desire to study and question CMC may stem from anxiety about the seeming loss or devaluing of face-to-face (f2f) communication. Aside from concerns about the digital cocoons many of us find ourselves in, CMC

has also raised concerns about privacy, cyberbullying, and lack of civility in online interactions.

Interaction Model of Communication

The interaction model of communication describes **communication as a process** in which participants alternate positions as sender and receiver and generate meaning by sending messages and receiving feedback within physical and psychological contexts (Schramm, 1997). Rather than illustrating communication as a linear, one-way process, the interaction model incorporates feedback, making communication more interactive and two-way.

Feedback includes messages sent in response to other messages. For example, your instructor or another student may respond to a point you raise during class discussion. Including a feedback loop also leads to a more complex understanding of the roles of participants in a communication encounter. Rather than having one sender, message, and receiver, this model has two sender-receivers who exchange messages. Each participant alternates roles as sender and receiver to keep a communication encounter going. Although this seems like a perceptible and deliberate process, we quickly alternate between the roles of sender and receiver and often without conscious thought.

The interaction model is also less message-focused and **more interaction-focused.** While the transmission model focuses on how a message was transmitted and whether or not it was received, the interaction model is more concerned with communication. This model acknowledges that so many messages are being sent at one time that many may not even be received. Some messages are also unintentionally sent. Therefore, in this model, communication is not judged effective or ineffective based on whether or not a single message was successfully transmitted and received.

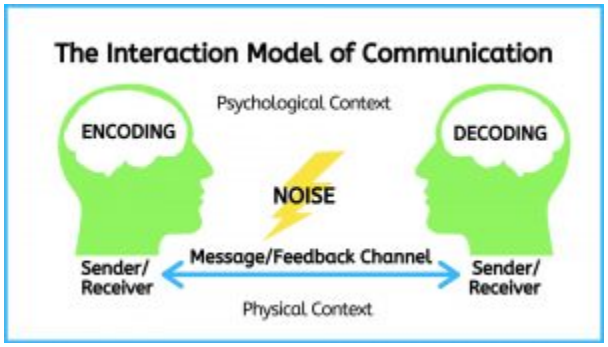


Figure 1.2.3. The interaction model of communication. Image Description (see Appendix A 1.2.3).

The interaction model takes **physical** and **psychological** context into account.

- **Physical context** includes the **environmental factors** in a communication encounter. The size, layout, temperature, and lighting of a space influence our communication. Imagine the physical contexts in which client encounters occur and how that may affect your communication. You may attempt to have an emotionally laden discussion with a client in a room where the beds are separated only by curtains. You may be assessing a client in the community where the lighting is dim. Whether the size of the room, the temperature, or other environmental factors, it is important to consider the role physical context plays in communication.
- **Psychological context** includes the **mental and emotional factors** in a communication encounter. Stress, anxiety, and emotions are examples of psychological influences that can affect our communication. You may be introducing yourself to one client but worried about another who is grieving or in pain. Alternatively, you may communicate with groups of clients and families experiencing myriad emotions.

Transaction Model of Communication

As the study of communication progressed, models expanded to account for more of the communication process. Many scholars view communication as more than

a process used to carry on conversations and convey meaning. We do not send messages like computers, and we do not neatly alternate between the roles of sender and receiver as an interaction unfolds. We also cannot consciously decide to stop communicating because communication is more than sending and receiving messages. **The transaction model** differs from the transmission and interaction models in significant ways, including the conceptualization of communication, the role of sender and receiver, and context (Barnlund, 1970).

The transaction model of communication describes **communication as a process** in which communicators **generate social realities** within social, relational, and cultural contexts. In this model, we don't just communicate to exchange messages; we communicate to:

- **create relationships**
- **form** intercultural alliances
- **shape** our self-concepts
- **engage** with others in dialogue to create communities

In short, you do not communicate *about* your realities; communication helps to **construct your realities**.

The roles of the sender and receiver in the transaction communication model differ significantly from the other models. Instead of labelling participants as senders and receivers, the people in a communication encounter are called **communicators**. Unlike the interaction model, which suggests that participants alternate positions as sender and receiver, the transaction model suggests that we are **simultaneously senders and receivers**.

For example, when you first meet a client, you send verbal messages, saying hello, who you are, and why you are there. Before you finish your introduction, the client is reacting nonverbally. You do not wait until you are done sending your verbal message to start receiving and decoding the nonverbal messages of the client. Instead, you simultaneously send your verbal message and receive the client's nonverbal messages. This is an important component of this model because it helps you understand how to adapt your communication. For example, in the middle of sending a verbal message, you can adapt your communication in

response to the nonverbal message you are simultaneously receiving from your communication partner.

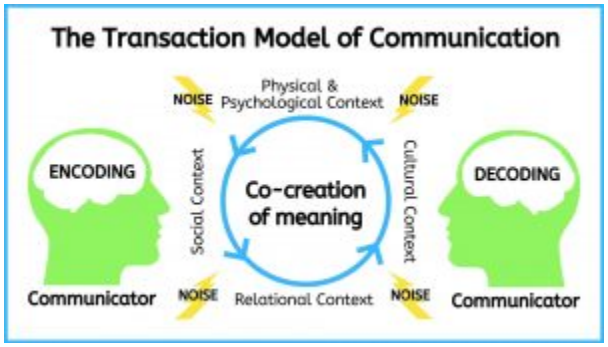


Figure 1.2.4. The transaction model of communication. Image Description (see Appendix A 1.2.4).

The transaction model also includes a **complete understanding of context**. The interaction model portrays context as physical and psychological influences that enhance or impede communication. While these contexts are important, they focus on message transmission and reception. Since the transaction model of communication views **communication as a force that shapes our realities** before and after specific interactions, it must **account for contextual influences outside of a single interaction.** The transaction model considers how social, relational, and cultural contexts frame and influences our communication encounters.

Here is a short description of each context:

- **Social context** refers to the **stated rules or unstated norms** that guide communication. As you are socialized into your area of health studies, you learn communication rules and norms, often called communication strategies, principles, standards, or competencies. Some common rules that influence social contexts in health studies include being truthful during your conversations, being patient and encouraging the client to speak, demonstrating empathy, speaking clearly, active listening, and so on.
- **Relational context** includes your previous interpersonal history and relationship with a person. You communicate differently with someone you

just met versus someone you have known for a long time. Initial interactions with people tend to be more highly scripted and governed by established norms and rules. Within a career in health studies, you should always communicate professionally because the relationship is professional, not personal.

- **Cultural context** includes **aspects of identity** such as gender, pronouns, ethnicity, sexual orientation, class, and ability. While you may be able to identify some aspects of the cultural context within a communication encounter, there may also be cultural influences that you cannot see. A competent communicator should not assume they know all the cultural contexts a person brings to an encounter because not all cultural identities are visible. Some people, especially those with identities that have been historically marginalized, are highly aware that their cultural identities influence their communication and influence how others communicate with them. Conversely, people with identities that are dominant or in the majority may rarely, if ever, think about the role their cultural identities play in their communication.



Figure 1.2.5. Cultural context is influenced by numerous aspects of our identities and is not limited to race or ethnicity.

Cultural context can be challenging to manage when it comes to the forefront of a communication encounter. Because intercultural communication creates uncertainty, it can deter people from communicating across cultures or make them view intercultural communication as unfavourable. But if you avoid communicating across cultural identities, you will likely not become more comfortable or competent as a communicator. Intercultural communication has the potential to enrich various aspects of our lives. To communicate well within various cultural contexts, it is important to keep an open mind and avoid making assumptions about others' cultural identities. As noted, not all cultural identities are visible. While you may readily identify some cultural contexts in a communication encounter, it is important to recognize that there may be other invisible cultural aspects to consider. As with the other contexts, it requires skill to adapt to shifting contexts, and the best way to develop these skills is through practice and reflection.

Each model we have looked at incorporates a different understanding of what communication is and what communication does. The transmission model views communication as a thing, like an information packet, that is sent from one place to another. In this view, communication is defined as sending and receiving messages. The interaction model views communication as an interaction in which a message is sent, followed by a reaction (feedback), another reaction, and so on. In this view, communication produces conversations and interactions within physical and psychological contexts. The transaction model views communication as integrated into our social realities in such a way that it helps us understand them and create and change them.

Watch: Transactional Communication



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=38#oembed-1

Video Transcript (see Appendix B 1.2)

The video will review transactional communication this is one model of how communication occurs.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=38#h5p-3



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https://openbooks.macewan.ca/professionalcommunication/?p=38#h5p-4

Summary of Communication Models

The transmission, interaction, and transaction models of communication we have covered are summarized below.

Model	Foci
Transmission Model	Frames communication as a thing, like an information packet, sent from one place to another. From this perspective, communication is defined as sending and receiving messages.
Interaction Model	Frames communication as an interaction in which a message is sent, followed by a reaction (feedback), followed by another reaction, and so on. From this perspective, communication is defined as producing conversations and interactions within physical and psychological contexts.
Transaction Model	Frames communication as integrated into social realities in such a way that it helps communicators understand communications and create and change them.

Key Takeaways

- Communication models are insufficiently complex to capture all that occurs in a communication encounter. Still, they can help us examine various steps in the process to better understand our communication and the communication of others.
- The transmission model of communication describes communication as a one-way, linear process in which a sender encodes a message and transmits it through a channel to a receiver who decodes it. The transmission of the message may be disrupted by environmental or semantic noise. This model is usually too simple to capture face-to-face interactions but can be usefully applied to computer-mediated communication.
- The interaction model of communication describes communication as a two-way process in which participants alternate positions as sender and receiver and generate meaning by sending and receiving feedback within physical and psychological contexts. This model captures the interactive aspects of communication but still doesn't account for how communication constructs our realities and is influenced by social and cultural contexts.
- The transaction model of communication describes communication as a process in which communicators generate social realities within social, relational, and cultural contexts. This model includes participants who are simultaneously senders and receivers and accounts for how communication constructs our realities, relationships, and communities.

Exercises

1. How might knowing the various components of the communication process help you in your academic, professional, and personal life?
2. What communication situations does the transmission model best represent? The interaction model? The transaction model?
3. Use the transaction model of communication to analyze a recent communication encounter you had. Sketch out the communication encounter and label each part of the model (communicators, message, channel, feedback, and physical, psychological, social, relational, and cultural contexts).
4. Think about the different types of noise that affect communication. List some examples of how noise can worsen communication in personal and professional contexts.
5. On a typical day, what types of CMC do you use?
6. What are some ways that CMC reduces stress in your life? What are some ways that CMC

increases stress in your life? Overall, do you think CMC adds to or reduces your stress more?
7. Do you think we, as a society, value face-to-face communication less than we used to? Why or why not?

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University of Minnesota Libraries Publishing. (2013). *Communication in the real world* [Adapted]. https://open.lib.umn.edu/communication/

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1.3 Communication Principles

Learning Objectives

- Explain how communication is integrated into various aspects of your life.
- Explore how communication meets physical, instrumental, relational, and identity needs.
- Explain how communication is guided by culture and context.

Most people think they are great communicators. However, very few people are "naturally" good. Communication takes time, skill, and practice. To be a great communicator, you must also be a great listener. It requires some proficiency and competence. Think about someone you know who is not a good communicator. Why is that person not good? Do they say things that are inappropriate, rude, or hostile?

Reasons to Study Communication

We need to study communication for a variety of reasons. **First,** it gives us a new perspective on something we take for granted every day. As stated earlier, most people think they are excellent communicators. However, most never ask another person if they are great communicators. Besides being in a public speaking class or listening to your friends' opinions, you probably do not get much feedback on the quality of your communication. Studying communication behaviours provides a new perspective on something you probably take for granted. Some people never realize how vital physiological functions are until they take a class on anatomy or biology. Similarly, some people never understand communication in a professional health environment until they take a communication studies course.In this book, we will learn all about communication from different aspects. As the saying goes, "You can't see the forest for the trees." In other words, you will not be able to

see the impact of your communication behaviours if you do not focus on certain communication aspects.

The **second** reason we study communication is based on the amount of time devoted to that activity. Think about your personal and professional daily routines; no doubt it involves communicating with others (via face-to-face, texting, electronic media, etcetera). In healthcare environments, we spend much time communicating with others, so we should make that time worthwhile and meaningful. We need to learn how to communicate better because a lot of our time is allotted to communicating with others.

The **third** reason why we study communication is to increase our effectiveness. There are several reasons why communication ruptures. The most popular reason is that people do not know how to communicate with each other, have low emotional intelligence, and often do not know how to work through problems, which can then create anger, hostility, and possibly violence. In these cases, communication must be effective for relationships to work and be satisfying. Think about all your relationships with friends, peers, family, coworkers, and significant others. It is possible that this course could make you more successful in those relationships.

Communication Meets Needs

As a student with years of education experience, you know that communication is far more than the transmission of information. The exchange of messages and information is essential for many reasons, but it is not enough to meet the various needs we have as human beings. While the content of our communication may help us achieve particular physical and instrumental needs, it also feeds into our identities and personal and professional relationships in ways that far exceed what we say.

Physical Needs

Studies show that there is a link between mental health and physical health. In other words, people who encounter negative experiences but are willing to

communicate those experiences are more likely to have better mental and physical health Adler et al. (2007) found that communication has been beneficial in avoiding or decreasing:

- stress
- anxiety
- depression
- cancer
- coronary problems
- the common cold

Research clearly illustrates that communication is vital for our physical health. Because many health problems are stress-induced or exacerbated by stress, communication offers a way to relieve this tension and alleviate some physical symptoms. People must share what they feel — if they keep it bottled up, they are more likely to suffer emotionally, mentally, and physically.

Practical Needs

Communication is a critical ingredient in our life. We need it to operate and to complete our daily tasks. Communication is the means to tell the barista what coffee you prefer, inform your healthcare team members about what hurts or ails you, or advise others that you might need help.

We know that communication helps in all professional work environments. Throughout your health studies program, you will most likely be evaluated on competencies related to interpersonal communication and leadership skills, as one must learn to become a competent communicator.

Identity Needs

Communication is not only essential for us to thrive and live. It is also important to discover who we are. From a very young age, you were probably told a variety of characteristics about your physical appearance and personality. You might have

been told you are funny, smart, pretty, friendly, talented, or insightful. All of these comments probably came from someone else. For instance, Sally went to a store without makeup and saw one of her close friends. Sally's friend told her that she looked horrible without any makeup. So, from that day forward, she never walked out of the house without wearing makeup. You can see that this comment affected Sally's behaviour and her perceptions about herself. Just one comment can influence how you think, act, and feel. Think about the comments that you have received in your life. Were they hurtful comments or helpful comments? Did they make you stronger or weaker? You are who you are based on what others have told you about yourself and how you responded to these comments. In an opposite example, Mark's professor told him he was not cut out for his chosen health profession and would probably not make it through the program. Mark used these comments to make himself better. He studied and worked harder, believing he was more than his professor's comments. In this situation, you can see that the comments helped shape his identity positively. Our identity changes as we progress through life, but communication is the primary means of establishing and fulfilling our identity needs.

Social Needs

Communication satisfies the social needs for pleasure, affection, companionship, escape, and relaxation (Adler et al., 2020). Additionally, using words to identify who we are, we use communication to establish relationships. Relationships exist because of communication. We share a part of ourselves with others each time we talk to them. We know that for people with strong relationships with others, this is due to their conversations. Think about all the relationships you are involved in and how communication differs. If you stop talking to the people you care about, your relationships might suffer. The only way relationships can grow is when communication occurs between individuals. Koesten (2004) analyzed family communication patterns and communication competence. She found that people in more conversation-oriented families were likelier to have better relationships than those who grew up in lower conversation-oriented families.

Communication is a Process

Communication can be defined as the process of understanding and sharing meaning (Pearson & Nelson, 2000). When we refer to communication as a process, we imply that it does not have a distinct beginning and end or follow a predetermined sequence of events. It can be challenging to trace the origin of a communication encounter since communication does not always follow a neat and discernible format, which makes studying communication interactions or phenomena difficult. Any time we pull out one part of the process for study or closer examination, we artificially "freeze" the process to examine it, which is not possible when communicating in real life. But sometimes scholars want to isolate a particular stage to gain insight by studying, for example, feedback or eye contact. Doing that changes the process itself, and by the time you have examined a particular stage or component of the process, the entire process may have changed. However, these behavioural snapshots are helpful for scholarly interrogation of the communication process, and they can also help us self-monitor and evaluate our communication practices, troubleshoot a problematic encounter we had, or slow things down to account for various contexts before we engage in communication (Dance & Larson, 1976).

Communication is Guided by Culture and Context

Context is a dynamic component of the communication process. Culture and context also influence how we perceive and define communication. Western culture tends to put more value on senders than receivers and the content rather than the context of a message, whereas Eastern cultures tend to communicate with the listener. These cultural values are reflected in our definitions and models of communication. Cultures vary regarding having a more individualistic or collectivistic cultural orientation. Canada is considered an individualistic culture, where the emphasis is put on individual expression and success. Japan is considered a collectivistic culture, where the emphasis is put on group cohesion and harmony. These strong cultural values are embedded in how we learn to communicate. In many collectivistic cultures, more emphasis is placed on silence and nonverbal context. Whether in Canada, Japan, or another country, people are

socialized from birth to communicate in culturally specific ways that vary by context.

Communication is Learned

Most of us are born with the capacity and ability to communicate, but we all communicate differently. This is because communication is learned rather than innate. As we have already seen, communication patterns are relative to the context and culture in which one communicates. Many cultures have distinct languages consisting of unique systems of symbols. A key principle of communication is that it is symbolic. Communication is symbolic because the words that make up our language systems do not directly correspond to something in reality. Instead, they stand in for or symbolize something. Odgen and Richards (1923) believed that there is a triangle of meaning with "thought," "symbol," and "referent" in a relationship.

All symbolic communication is learned, negotiated, and dynamic. The letters *b-o-o-k* refer to a bound object with multiple written pages. We also know that the letters *t-r-u-c-k* refer to a vehicle with a bed in the back for hauling things. But if we learned in school that the letters *t-r-u-c-k* referred to a bound object with written pages, and *b-o-o-k* referred to a vehicle with a bed in the back, that would make just as much sense because the letters do not refer to the object. The word itself only has the meaning that we assign to it. In the verbal communication chapter, we will learn more about how language works, but communication is more than the words we use.

th issues in some cultures in public is considered inappropriate. Still, it would not be odd to overhear people in a rural grocery store in Canada talking about their job, education, children, or upcoming surgery. There are some communication patterns shared by vast numbers of people, some particular to a specific profession, for example, who have terminology and jargon that would not make sense to someone outside the profession. These examples are not on the same scale as differing languages but still indicate that communication is learned. They also illustrate how rules and norms influence how we communicate.

Communication Has Ethical Implications

Another culturally and situationally relative principle of communication is that communication has ethical implications. **Communication ethics** addresses the process of negotiating and reflecting on our actions and communication regarding what we believe to be right and wrong (Pearson et al., 2006). In communication ethics, we are more concerned with people's decisions about right and wrong than the systems, philosophies, or religions that inform those decisions. Much of ethics is a grey area. Although we talk about making decisions regarding right and wrong, the choice is rarely that simple. We should act "to the right extent, at the right time, with the right motive, and in the right way " (Pearson et al., 2006) and consider what we say, how we say it, and the impact it may have on another person.

Communication has broad ethical implications. When wrestling with communication ethics, it is difficult to state that something is 100 percent ethical or unethical. We all make choices daily that are more ethical or less ethical, and we may confidently decide only later to learn that it was not the most ethical option. In such cases, our ethics and goodwill are tested since, in any given situation, multiple options may seem appropriate, but we can only choose one. If, in a situation, we make a decision and reflect on it and realize we could have made a more ethical choice, does that make us a bad person?

While many behaviours can be more easily labelled as ethical or unethical, communication is not always as clear. However, health-related professions have expectations and competencies related to professional communication.

Communication Influences Your Thinking About Yourself and Others

We all share a fundamental drive to communicate. As previously stated, communication can be defined as the process of understanding and sharing meaning (Pearson & Nelson, 2000). You share meaning in what you say and how you say it, both in oral and written forms. If you could not communicate, what would

life be like? A series of never-ending frustrations? Not being able to ask for what you need or even to understand the needs of others?

Being unable to communicate might even mean losing a part of yourself, for you communicate your **self-concept** — your sense of self and awareness of who you are — in many ways. Do you like to write? Do you find it easy to make a phone call to a stranger or to speak to a room full of people? Do you like to work alone or in teams and groups? Perhaps someone told you that you do not speak clearly, or your grammar needs improvement. Does that make you more or less likely to want to communicate? For some, it may be a positive challenge; for others, it may be discouraging, but in all cases, your ability to communicate is central to your self-concept.

Take a look at clothing. What are the brands you are wearing? What are the brands your client is wearing? What do you think they say about you? What do they say about your client? Do you feel that certain styles of shoes, jewelry, tattoos, music, or even automobiles express who you or your client are? Part of self-concept is how individuals express themselves through texting, writing longer documents such as essays and research papers, or speaking. In some ways, the labels and brands we also wear communicate with your group or community. They are recognized and, to some degree, are associated with you. Just as your words represent you in writing, how you present yourself with symbols and images influences how others perceive you.

On the other side of the coin, your communication skills help you to understand others — not just their words, but also their tone of voice, their nonverbal gestures, or the format of their written documents provide you with clues about who they are and what their values and priorities may be. Your success as a communicator hinges on your ability to listen actively and accurately interpret others' messages.

Communication Influences How You Learn

When you were an infant, you learned to talk over many months. A group of caregivers around you talked to each other, and you caught on that you could get something when you used a word correctly. Before you knew it, you spoke

in sentences, in a language you learned from your family or those around you. When you got older, you did not learn to ride a bike, drive a car, or even text a message on your cell phone in one brief moment. Learning occurs in the same way as continuously improving your communication skills.

You learn to speak in public by having conversations, answering questions and expressing your opinions in class, and preparing and delivering a "stand-up" speech. Similarly, you learn to write by first learning to read, then by writing and thinking critically. Your speaking and writing reflect your thoughts, experience, and education. Part of that combination is your experience listening to other speakers, reading varying documents and styles of writing, and studying formats similar to those you aim to produce. Speaking and writing are critical communication skills you will use individually, in teams, and in groups.

As you study communication, you may receive suggestions for improvement and clarification from professionals more experienced than you. Take their suggestions as challenges to improve, and do not give up when your oral presentation, client interaction, or academic paper does not communicate the message you intend. Stick with it until you get it right. Your success in communicating is a skill that applies to every field of work in health studies, and it makes a difference in your personal and professional relationships with others.

Remember, luck is simply a combination of preparation and timing. You want to be prepared to communicate effectively and professionally when given the opportunity. Each time you communicate effectively, your success will bring more success.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here: https://openbooks.macewan.ca/professionalcommunication/?p=46#h5p-38

Key Takeaways

- Communication meets our physical needs by helping us maintain physical and psychological well-being; our instrumental needs by helping us achieve short- and long-term goals; our relational needs by helping us initiate, maintain, and terminate relationships; and our identity needs by allowing us to present ourselves to others in particular ways.
- Communication is a process that includes messages that vary in terms of conscious thought and intention. Communication is also irreversible and unrepeatable.
- Communication is guided by culture and context.
- We learn to communicate using systems that vary based on culture and language.
- Rules and norms influence the routines and rituals within our communication.
- Communication ethics varies by culture and context and involves the negotiation of and reflection on our actions regarding what we think is right and wrong.

Exercises

- Think of an example for each of the types of communication needs. Which need is most important for you? Why?
- Why do you think it is essential to study professional communication? Is this class required for you? Do you think it should be required for everyone entering a health studies profession?
- Think about how others have shaped your identity. What is something that was said to you that impacted how you felt? How do you feel now about the comment?

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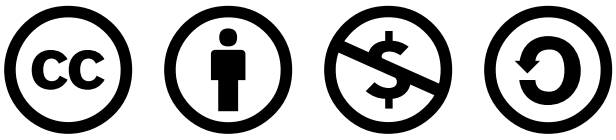
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1.4 Communication Competence

Learning Objectives

- Define communication competence.
- Explain each component of the definition of communication competence.
- Discuss strategies for developing communication competence.
- Discuss communication apprehension and employ strategies to manage this.

Communication is common in that it is something that we spend most of our time doing. Still, making sense of and improving communication takes competence learned through deliberate study and personal reflection. So, to get started on your road to competence, we propose that you do two things. **First,** challenge yourself to see the value of studying communication in your health field. Apply the concepts we are learning to your personal and professional lives and find ways to make this class help you achieve your goals. **Second**, commit to using the knowledge you gain in this class to improve your communication and the communication of those around you. Become a higher self-monitor, which means starting to notice your communication more. We all know areas where we could improve our communication, and taking this class will expose us even more. But you have to be prepared to put in the time to improve; for example, it takes effort to become a better listener or to give better feedback. If you start these things now, you will be primed to take on more communication challenges presented throughout this book.

The ability to communicate effectively is often included as a primary undergraduate learning goal, along with other vital skills like writing, critical thinking, and problem-solving. You may not have heard professors or university administrators use the

term *communication competence*. Still, as we learn more about it in this section, you will see how communication competence can benefit you in many aspects of your life. Though this resource focuses on professional communication in health studies, strategies for developing communication competence are not limited to this. Watch the following video and consider how communication competence leads to effective communication in health care.

Watch: Effective Communication Can Save Lives



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=51#oembed-1

Video Transcript (see Appendix B 1.4)

The video discusses effective communication in the healthcare setting

Defining Competence

We have already defined **communication,** and you probably know that to be competent at something means you know what you are doing. When we combine these terms, we get the following definition: communication competence refers to the knowledge of effective and appropriate communication patterns and the ability to use and adapt that knowledge in various contexts (Cooley & Roach, 1984, p. 25). To better understand this definition, let's break apart its components.



Figure 1.4.1. Developing communication competence can bring many rewards, but it also requires time and effort.

The first part of the definition we will unpack focuses on **knowledge**. The cognitive elements of competence include knowing how to do something and understanding why things are done the way they are (Hargie, 2011, p. 9). People can develop cognitive competence by observing and evaluating the actions of others. Cognitive competence can also be developed through instruction. Since you are currently taking a communication class, you are encouraged to observe the communication concepts you are learning in the communication practices of others and yourself. This will help bring the concepts to life and also help you evaluate how professional communication matches up with communication concepts. As you build a repertoire of communication knowledge based on your experiential and classroom knowledge, you will also develop behavioural competence.

The second part of the definition of communication competence that we will unpack is **the ability to use communication effectively**. Individual factors affect our ability to do anything. Not everyone has the same athletic, musical, or intellectual ability. At the individual level, a person's physiological and psychological characteristics affect competence. In terms of physiology, age, maturity, and communication ability affect competence. In terms of psychology, a person's mood, stress level, personality, and level of communication apprehension (level of communication anxiety) affect competence (Cooley & Roach, 1984, p. 25). All of these factors will either help or hinder you when you begin to apply the knowledge

you have learned to actual communication behaviours. For example, you might know strategies for communicating interpersonally. Still, interpersonal communication anxiety kicks in when you are in front of a client, peers, or colleagues, and may prevent you from fully putting that knowledge into practice.

The third part of the definition we will unpack is the **ability to adapt to various contexts**. Whether something is deemed competent or not is based on social and cultural context, which makes it impossible to have a single standard for communication competence (Cooley & Roach, 1984, p. 25). Social variables such as status and power affect competence. In a social situation where one person — say, a professor — has more power than another (for example, a student), the professor is typically the person who sets the standard for competence. Cultural variables such as race and nationality also affect competence. A Taiwanese woman who speaks English as an additional language may be praised for her competence in the English language in her home country but be viewed as less competent in North America because of her accent. In summary, although we have a clear definition of communication competence, there are no definitions for how to be competent in any given situation since competence varies at the individual, social, and cultural levels.

Even though no guidelines for or definitions of competence will be applicable in all situations, each professional body within the field of health studies identifies many aspects of competence related to communication. The primary focus has been on competencies related to speaking, listening, therapeutic relationships, and working effectively together (Rider & Keefer, 2006). Scholars suggest health studies students taking a communication class should be able to effectively perform the following competencies in terms of speaking, listening, therapeutic communication, and teamwork:

- state ideas clearly
- communicate ethically
- recognize when it is appropriate to communicate
- identify their communication goals
- select the most appropriate and effective mode and techniques of communication for the situation
- demonstrate mutuality through collaboration and cooperation
- identify and manage misunderstandings

- manage conflict
- be open-minded about another's point of view, cultural and ethnic beliefs, practices, and language
- actively listen

(Morreale et al., 1998; Rider & Keefer, 2006)

While most of these are skill-focused rather than interpersonally or culturally focused, they provide a concrete way to assess your communication competencies and prepare yourself for professional speaking, listening relationship building, and teamwork, which is often skill-driven.

Developing Competence

Knowing the dimensions of competence is an important first step toward developing competence. Everyone reading this book already has some experience with and knowledge about communication. After all, you have spent many years explicitly and implicitly learning to communicate. For example, we are explicitly taught the verbal codes we use to communicate. On the other hand, although there are numerous rules and norms associated with nonverbal communication we rarely receive explicit instructions about it. Instead, we learn by observing others and through trial and error with our own nonverbal communication. Competence obviously involves both verbal and nonverbal elements, but it also applies to many situations and contexts. Communication competence is needed in order to understand communication ethics, develop cultural awareness, use computer-mediated communication, and think critically. Competence involves knowledge, motivation, and skills. It is not enough to know what good communication consists of — you must also have the motivation to reflect on and better your communication, and the skills needed to do so.

With regard to competence, we all have areas where we are skilled and areas where we have deficiencies. In most cases, we can consciously decide to work on our deficiencies, which may take considerable effort. There are multiple stages of competence that we challenge you to assess as you communicate in your daily life:

unconscious incompetence, conscious incompetence, conscious competence, and unconscious competence (Hargie, 2011, p. 9).

Before you have built up a rich cognitive knowledge base of communication concepts, and practiced and reflected on skills in a particular area, you may exhibit **unconscious incompetence**, which means you are not even aware that you are communicating in an incompetent manner. Once you learn more about communication and have a vocabulary to identify concepts, you may find yourself exhibiting **conscious incompetence**. This is when you know what you should be doing, but realize that you are not doing it as well as you could. However, as your skills increase you may advance to **conscious competence**, meaning that you know you are communicating well at the moment, which will add to your bank of experiences to draw from in future interactions. When you reach the stage of **unconscious competence**, you communicate successfully without straining to be competent. However, reaching the stage of unconscious competence in one area or with one person does not mean you will always stay there. We are faced with new communication encounters regularly, and although we may be able to draw on the communication skills we have learned about and developed, it may take a few instances of conscious incompetence before we can advance to later stages.

Students assume that individuals working in health-related environments have a high level of communication competence, and may be hard on themselves for being at the stage of conscious incompetence, where they catch themselves communicating poorly with regard to a concept recently studied. It is important to note that just because they know the concepts and definitions does not mean they can always put them to good use. We are all imperfect and fallible, and if we expect to be perfect communicators after studying this, then we are setting ourselves up for failure. However, when we do mess up, it is important to reflect on it. And now you are starting to do the same thing, which is to notice and reflect on your communication ability within the field of health studies. That already puts you ahead of most people.



Figure 1.4.2. Becoming more mindful of your communication and the communication of others can contribute to your communication competence.

One way to progress toward communication competence is through the ability to monitor yourself. This is also known as **self-monitoring**. This is the ability to focus on your behaviour, and in turn, determine how to behave in the situation. In every speaking situation, most people will have an internal gauge of what they might say next or not say. Some people never give any thought to what they might say to others. These individuals would have low self-monitoring skills, in which what you see is what you get. Other people may have high self-monitoring skills and pay attention to every little thing: how they stand, where their eyes move, how they gesture, and maybe even how they breathe. They pay attention to these minor details because they are concerned with how the message might come across to others. Competent communicators have a balance of high and low self-monitoring, in which they realize how they might be perceived, but they are not overly focused on all the details of themselves.

Another way to progress toward communication competence is to become a more **mindful communicator**. A mindful communicator actively and fluidly processes information is sensitive to communication contexts and multiple perspectives and is able to adapt to novel communication situations (Burgoon et al., 2000). Becoming a more mindful communicator has many benefits, including achieving communication goals, detecting deception, avoiding stereotypes, and reducing conflict. Whether or not we achieve our day-to-day communication goals depends

on our communication competence. Various communication behaviours can signal that we are communicating mindfully. For example, when an instructor asks a health studies student to paraphrase their understanding of the instructions they were just given shows that the instructor is aware that verbal messages are not always clear, that people do not always actively listen, and that people often do not speak up when they are unsure of instructions for fear of appearing incompetent or embarrassing themselves. Some communication behaviours indicate that we are not communicating mindfully, such as withdrawing from a client or instructor or engaging in passive-aggressive behaviour during a period of interpersonal conflict. Most of us know that such behaviours lead to predictable and avoidable conflict cycles, yet we are all guilty of them. Our tendency to assume that people are telling us the truth can also lead to negative results. Therefore, a certain amount of tentativeness and mindful monitoring of a person's nonverbal and verbal communication can help us detect deception.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=51#h5p-39

Overcoming Anxiety

Whether you will give your first oral presentation in this class or another class, you may be one of many students in a health studies communication course to face anxiety about communication in general or public speaking in particular.



Figure 1.4.3. Communication apprehension and public speaking anxiety are common but can be managed productively.

Decades of research conducted by communication scholars show that communication apprehension is common among college students (Priem & Solomon, 2009, p. 260). **Communication apprehension (CA)** is fear or anxiety experienced by a person due to actual or imagined communication with another person or persons (Priem & Solomon, 2009). Communication apprehension can include multiple forms of communication, not just public speaking. Of post-secondary students, 15% to 20% experience high-trait CA, meaning they are generally anxious about communication. Furthermore, 70% of post-secondary students experience some traits of CA, which means that addressing communication anxiety in a class like the one you are taking now will benefit most students (Priem & Solomon, 2009, p. 260). Public speaking anxiety is a type of CA that produces physiological, cognitive, and behavioural reactions in people when faced with a real or imagined presentation (Bodie, 2010, p. 72). Physical reactions such as "sweaty palms, perspiring, a fast pulse, shallow breathing, cold extremities, flushed skin, nausea, trembling hands, quivering legs or butterflies in the stomach are the bodies response to the release of hormones such as adrenaline" (Engleberg et al., 2005). Additionally, CA can lead others to make assumptions about communication competence that may be unfavourable. Even if you are intelligent, prepared, and motivated, CA and public speaking anxiety can detract from your communication and lead others to perceive you in ways you did not intend. Communication apprehension is a common issue faced by many people, so you are not alone. There are ways that you can manage your anxiety:

Top 10 Ways to Reduce Speaking Anxiety

1. Remember, you are not alone. Public speaking anxiety is common, so do not ignore it — confront it.
2. You cannot literally "die of embarrassment." Audiences are forgiving and understanding.
3. It always feels worse than it looks.
4. Take deep breaths. It releases endorphins, which naturally fight the adrenaline that causes anxiety.
5. Dress professionally to enhance confidence.
6. Channel your nervousness into positive energy and motivation.
7. Start your outline and research early. Better information equals higher confidence.
8. Practice and get feedback from a trusted source.
9. Visualize success through positive thinking.
10. Prepare, prepare, prepare! Practise is a speaker's best friend.

Key Takeaways

- Communication competence refers to the knowledge of effective and appropriate communication patterns and the ability to use and adapt that knowledge in various contexts.
- To be a competent communicator, you should have cognitive knowledge about communication-based on observation and instruction, understand that individual, social, and cultural contexts affect competence, and adapt to those various contexts.
- Integrating skills: Developing communication competence in speaking and listening will help you in not just academic but professional contexts.
- Levels of communication competence include unconscious incompetence, conscious incompetence, conscious competence, and unconscious competence.
- To develop communication competence, you must become a more mindful communicator and self-monitor at a higher level.
- Communication apprehension (CA) refers to fear or anxiety experienced by a person due to real or imagined communication with another person or persons. Public speaking anxiety is a form of CA that specifically focuses on anxiety about giving a public presentation. Both are commonly experienced by most people and can be managed using various strategies.

Exercises

1. What aspects of communication do you think are “common sense?” What aspects of communication do you think require more formal instruction or study?
2. What communication concept has appealed to you most so far? How can you see this concept applying to your life?
3. Complete a communication self-assessment. What are your strengths as a communicator? What are your opportunities for growth? What can you do to start improving your communication competence?

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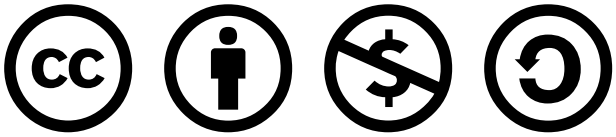
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1.5 Professional Communication

Learning Objectives

- Define professional communication.
- Explain the principles of professional communication.
- Integrate principles of professional communication by composing an email to your professor.

Professional Communication

Professional communication is an essential part of working in health studies. You are entering a "profession," which means there are certain expectations regarding your professional conduct and, specifically, how you communicate.

Professional communication involves a **level of formality** and is an essential component of your post-secondary education. It differs from the informal communication you may engage in with friends and family. It also applies to your verbal and written communications, including email.

Professional communication principles include being ethical, truthful, accurate, clear, concise, and comprehensive. For example, you should say or write something clearly and concisely while including all relevant information. You should also have a professional tone conveyed through appropriate greetings, complete sentences, and grammar. To be professional, you need to know your audience; the content and form of your message should be tailored to your audience.

Here are some tips to follow in terms of professional communication:

- Introduce yourself by **name, role, and institution**, such as: “I am Abbie, a Year One health studies student from MacEwan University.”
- Address the person you are speaking to formally. Also, **do not assume the gender** of the person you speak to. For example, you should avoid using terms such as “miss,” “ma’am,” “sir,” or “mister,” until you know how the recipient identifies and wants to be addressed. If uncertain, introduce yourself fully and ask how the recipient wants to be addressed.
- State your **personal pronouns** if applicable and invite others to share their personal pronouns.
- Clearly **articulate** your message (what you are trying to say).
- Speak in **complete sentences**.
- Be **honest**.
- Be **polite**. Your communication is a reflection of **YOU** and your professionalism.

Because a lot of communication occurs electronically, it is essential to consider **how to construct an email**. Here are some tips:

- Use a professional email address. At most universities, your email with a professor should originate from your **university email (not your Gmail or other accounts)**.
- Begin with a clear description in the **subject line**. For example, students should include the course code in the subjective line and a brief description identifying the reason for the email (e.g., “HLST 154 Section BN02: question regarding Week 3 quiz”).
- Use a **professional email greeting** and salutation to address your professor or the salutation preferred by the professor.
    - Appropriate: “Dear Professor Smith” or “Hello, Dr. Hall.”
    - Inappropriate: “Hey teacher” or “Hey Lindsey.”
- **Introduce yourself** so that the email recipient knows who you are. Remember, professors teach several courses and course sections. Thus, you might say, “I am Minta Lee. I am a student in your Wednesday section of HLST 154.”
- Refer to any **attachments** in the email text.
- **Avoid** point form, slang, abbreviations, and emoticons.
- Include a **signature block** at the end of your email identifying your full name, role, institution, and contact information.
- **Proofread** your email for accuracy, grammar, and spelling.

- Avoid humour and excessive use of exclamation points and all caps. These can easily be misinterpreted.

Addressing and Referring to Your Instructor

Students are often uncertain about how to address their instructors or professors. It is okay to ask them how they would like to be addressed. Until you know, you should refer to them as "Professor X" (insert their surname) or "Dr. X" (insert their surname).

Although some instructors and professors may invite you to use their first name, it is part of professional communication etiquette to use "Professor X" or "Dr. X" (including both their first and last name) when referring to them with others. In addition to ensuring professional communication, this helps to clarify if your instructors share a first or last name with another instructor.

Example: Dr. Huang is your course instructor, and they have encouraged you to contact another professor to discuss potential research opportunities. Although Dr. Huang has permitted you to call her Lisa in the classroom, you should always refer to them as Dr. Lisa Huang in communication with others. Thus, when initiating communication with the instructor Dr. Huang referred you to, you may consider a beginning such as: "Dear Dr. Hameed. I am a student in the undergraduate Year One health studies communication course with Dr. Lisa Huang. Dr. Huang has encouraged me to reach out to you about potential research opportunities because of my interest in emotional intelligence in health care."

Key Takeaways

- Professional communication requires formality when speaking, writing, and composing emails.
- Professional communication principles include being ethical, truthful, accurate, clear, concise, and comprehensive.

Exercises

1. Compose an email to your professor using this section's professional communication principles and tips.

Activity: Check your Understanding

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CHAPTER 2: SELF AND PERCEPTION

Just as our perception of others affects how we communicate, so does our perception or view of ourselves. But what influences how we see ourselves? How much of ourselves is a product of our own making and how much of it is constructed based on how others react to us? How do we present ourselves to others in ways that maintain our sense of self or challenge how others see us? We will begin to answer these questions in this section as we explore self-concept, self-esteem, and self-presentation.
Self-presentation is also referred to as impression management.

Think back to the first day of classes. Did you plan for what you were going to wear? Did you get the typical school supplies together? Did you try to find your classrooms ahead of time or look for the syllabus online? Did you look up your professors on an online professor evaluation site? Based on your answers to these questions, your professors could form an impression of who you are as a student. However, would that perception be accurate? Would it match up with how you see yourself as a student?

Moreover, perception, of course, is a two-way street. You also formed impressions about your professors based on their appearance, dress, organization, intelligence, and approachability. The instructor and students' impressions on the first day helped set the tone for the rest of the semester. As we go through our daily lives, we perceive all sorts of people and objects, and we often make sense of these perceptions by using previous experiences to help filter and organize the information we take in (Broadbent, 2013). Sometimes we encounter new or contradictory information that changes how we think about a person, group, or object. The perceptions that we make of others and that others make of us affect how we communicate and act. In this chapter, we will learn about the perception process, how we perceive others, how we perceive and present ourselves, and how we can improve our perceptions.

2.1 All About Self

Learning Objectives

- Explain self-awareness.
- Explain the components that make up the "self."
- Compare and contrast self-concept, self-esteem, and self-efficacy.
- Describe influences on self-perception.
- Explain the connection between social penetration, social comparison, and self-disclosure theories.
- Discuss the process of self-disclosure, including how we make decisions about what, where, when, and how to disclose.
- Describe impression management and its influence on communication.

If we define ourselves through our actions, what might those actions be, and are we no longer ourselves when we no longer engage in those activities? For most people, psychologist Steven Pinker (2009) defines the conscious present as about three seconds. Everything else is past or future. Who are you now, and will the self you become an hour later be different from the self-reading this sentence?

Just as the communication process is dynamic, not static (i.e., constantly changing, not staying the same), you, too, are a dynamic system. Physiologically, your body constantly changes as you inhale and exhale air, digest food, and cleanse waste from each cell. Psychologically you are always in a state of change as well. Some aspects of your personality and character will be constant, while others will shift and adapt to your environment and context. That complex combination contributes to the self you call yourself. We may define self as one's sense of individuality, personal characteristics, motivations, and actions (McLean, 2005). Still, our definition will fail to capture who we are and who we will become.

To understand our communication interactions with others, we must first understand ourselves. Although each of us experiences ourselves as a singular

individual, our sense of self comprises three separate yet integrated components: self-awareness, self-concept, and self-esteem.

Self-Awareness

Self-awareness can be defined in many ways, including "conscious knowledge of one's character, emotions, values, assumptions, motives, and desires" (Wood et al., 2008). If "awareness" means consciously taking note of the world around us, then self-awareness should mean bringing awareness to yourself.

Self-awareness allows you to see things from others' perspectives, practice self-control, experience pride in yourself and your work, and have general self-esteem. It also leads to better decision-making, improves personal and professional communication, and enhances self-confidence and competence.

Self-reflection, introspection, mindfulness, or meditation can increase awareness of self and is the primary mechanism to influence personality development. This is the more *internally-focused* form of self-awareness. Self-awareness can also be gained through feedback from other trusted people. This is a more *externally-focused* form of self-awareness. Both forms of knowledge about self are helpful and can lead to many improvements in your life. To embark on a well-balanced journey of self-awareness, consider the following actions:

- ***Search for yourself*** -experiment with mindfulness, meditation, and self-reflective practices.
- ***Share-*** with those you trust the many parts of yourself, including your ideas, thoughts, feelings, concerns and worries, motivations, and passions.
- ***Look outside yourself*** -seek feedback from those you trust who see you in action in various contexts.
- ***Challenge yourself –*** *as* you know more about yourself, your limits, and your desires, challenge yourself to step beyond your comfort zone and experience new things. You will discover new things about yourself and grow at the same time.

As you explore self-awareness, you may notice that you can be tough on yourself,

overly critical, and perhaps even insecure. Developing a solid sense of yourself is crucial because you monitor your behaviours and form impressions of yourself through self-observation. As you are watching and observing your actions, you are also engaging in social comparison, which is observing and assigning meaning to others' behaviour and then comparing it with your own. Social comparison has a particularly potent effect on the self when we compare ourselves to those we wish to emulate. The critical point in understanding who you are, what you believe about yourself, how you think you communicate, and how you are shaped by those you interact with begins with awareness of yourself (Beebe et al., 2010).

Self-Concept, Self-Esteem, and Self-Efficacy

Self-Concept

Self-concept refers to the overall idea of who a person thinks they are. If someone said, "Tell me who you are," your answers would be clues as to how you see yourself and your self-concept. Each person has an overall self-concept that might be encapsulated in a short list of overarching characteristics that they find essential. But each person's self-concept is also influenced by context, meaning we think differently about ourselves depending on our situation. Sometimes, personal characteristics such as our abilities, personality, and other distinguishing features will best describe who we are. You might consider yourself laid back, traditional, funny, open-minded, or driven, or you might label yourself a leader or a thrill seeker. In other situations, our self-concept may be tied to a group or cultural membership. For example, you might consider yourself a Sigma Phi Epsilon fraternity member or a track team member.

Our self-concept is also formed through our interactions with others and their reactions to us. The concept of the looking-glass self explains that we see ourselves reflected in other people's responses to us and then form our self-concept based on how we believe other people see us (Cooley, 1902). This reflective process of building our self-concept is based on what other people have said, such as "You are a good listener," and other people's actions, such as coming to you for advice. These thoughts evoke emotional responses that feed into our self-concept. For example,

you may think, “I am glad that people can count on me to listen to their problems.” This is also referred to as **reflected appraisal,** and the people whose reflections we consider essential are known as **significant others**.

We also develop our self-concept through comparisons to other people. Social comparison theory states that we describe and evaluate how we compare ourselves to other people. **Social comparisons** are based on two dimensions: superiority/inferiority and similarity/difference (Hargie, 2011).

In terms of superiority and inferiority, we evaluate characteristics such as attractiveness, intelligence, athletic ability, etc. For example, you may judge yourself to be more intelligent than your brother or less athletic than your best friend, and these judgments are incorporated into your self-concept. This process of comparison and evaluation is not necessarily flawed, but it can have negative consequences if our reference group is inappropriate. We use reference groups for social comparison, which typically change based on our evaluation. Many people choose unreasonable reference groups for social comparison regarding athletic ability. Suppose an individual wants to get into better shape and starts an exercise routine. In that case, they may be discouraged by difficulty keeping up with the aerobics instructor or a running partner and judge themselves as inferior, which could negatively affect their self-concept. Using as a reference group people who have only recently started a fitness program but have shown progress could help maintain a more accurate and hopefully positive self-concept.

We also engage in social comparison based on similarities and differences. Since self-concept is context-specific, similarity may be desirable in some situations and difference more desirable in others. Factors such as age and personality may influence whether or not we want to fit in or stand out. Although we compare ourselves to others throughout our lives, adolescent and teen years usually bring new pressures to be similar to or different from particular reference groups. Think of all the cliques in high school and how people voluntarily and involuntarily broke off into groups based on popularity, interest, culture, or grade level. Some kids in your high school probably wanted to fit in with and be similar to others in the marching band but different from the football players. Conversely, athletes were more apt to compare themselves, in terms of similar athletic ability, to other athletes rather than kids in debate clubs. But social comparison can be complicated by perceptual influences. As we learned earlier, we organize information based on similarities and

differences, but these patterns only sometimes hold true. Even though students involved in athletics and arts may seem very different, a dancer or singer may be very athletic, perhaps even more so than a football team member. There are positive and negative consequences of social comparison.

We generally want to know where we fall in ability and performance compared to others, but what people do with this information and how it affects self-concept varies. Only some people feel they need to be at the top of the list, but some will only stop once they get a high score on a video game or set a new school record in a track-and-field event. Some people strive to be the first chair in the clarinet section of the orchestra, while another person may be content to be the second chair. The education system promotes social comparison through grades and rewards such as honour rolls and dean's lists. University faculty typically report class aggregate grades, meaning the total number of As, Bs, Cs, etc. This does not violate anyone's privacy rights but allows students to see where they fell in the distribution. This type of social comparison can be used as motivation. The student who was one of only three out of 23 to get a D on the exam knows that most classmates are performing better than they are, which may lead them to think, "If they can do it, I can do it." But the social comparison that is not reasoned can have adverse effects and result in negative thoughts like "Look at how bad I did. Man, I am stupid!" These negative thoughts can lead to negative behaviours because we try to maintain internal consistency, meaning we act in ways that match our self-concept. So if the student begins to question their academic abilities and then incorporate an assessment of themselves as a "bad student" into their self-concept, they may behave in ways consistent with that, which will only worsen their academic performance. Additionally, a student might be comforted to learn that they are not the only person who got a D and then not feel the need to try to improve since they have company. You can see in this example that evaluations we place on our self-concept can lead to cycles of thinking and acting. These cycles relate to self-esteem and self-efficacy, which are components of our self-concept.

Self-Concept Components

Self-concept is based on the **attitudes, beliefs, and values** that you have about yourself. Identity and self-concept are so intertwined that any lasting desired change or improvement becomes difficult (Fiske & Taylor, 1991).

An **attitude** is your immediate disposition toward a concept or an object. Attitudes can change quickly and frequently. You may prefer vanilla while someone else prefers peppermint, but if that person tries to persuade you how delicious peppermint is, you might be willing to try it and find that you like it better than vanilla.

Beliefs are ideas based on our previous experiences and convictions and may not necessarily be based on logic or fact. You no doubt have beliefs about political, economic, and religious issues. These beliefs may not have been formed through rigorous study, but you hold them as essential aspects of self. Beliefs often serve as a frame of reference through which we interpret our world. Although beliefs can be changed, it usually takes time or robust evidence to persuade someone to change a belief.

Values are core concepts and ideas about what we consider good or bad, right or wrong, or what is worth making a sacrifice for. Our values are central to our self-image, which makes us who we are. Like beliefs, our values may not be based on empirical research or rational thinking, but they are even more resistant to change than are beliefs. A person may need to undergo a transformative life experience to change values.

For example, suppose you highly value the freedom to make personal decisions, including wearing a helmet while driving a motorcycle. This value of individual choice is central to your thinking, and you are unlikely to change this value. However, you might reconsider this value if your brother was driving a motorcycle without a helmet and suffered an accident that fractured his skull and left him with permanent brain damage. While you might still value freedom of choice in many areas of life, you might become an advocate for helmet laws — and perhaps also for other forms of highway safety, such as stiffer penalties for cell phone talking and texting while driving.

Self-Esteem

Self-esteem refers to the judgments and evaluations we make about our self-concept. While self-concept is a broad description of the self, self-esteem is more specifically an evaluation of the self (DeHart & Pelham, 2007). If you were again

prompted to “tell me who you are” and then asked to evaluate (label as good/bad, positive/negative, desirable/undesirable) each of the things you listed about yourself, you would reveal clues about your self-esteem. Like self-concept, self-esteem has general and specific elements. Generally, some people are more likely to evaluate themselves positively, while others are more likely to evaluate themselves negatively (DeHart & Pelham, 2007). More specifically, our self-esteem varies across our life span and contexts.

How we judge ourselves affects our communication and behaviours, but not every negative or positive judgment carries the same weight. The negative evaluation of a trait that is not very important for our self-concept will likely not result in a loss of self-esteem. For example, someone may need to improve at drawing. While they appreciate drawing as an art form, they do not consider drawing ability a big part of their self-concept, so if someone critiqued their drawing ability, their self-esteem would not take a big hit. If that person considers themselves a good teacher and has spent considerable time and effort improving their knowledge of teaching and teaching skills, a critique of these would hurt their self-esteem. This does not mean that we cannot be evaluated on something we find important. For example, while teaching is important to faculty members’ self-concept, they are regularly evaluated. Each term, they are reviewed by students, program deans, and colleagues. Most of that feedback is in the form of praise and constructive criticism (which can still be difficult to receive), but when taken in the spirit of self-improvement, it is valuable and may even enhance self-concept and self-esteem. In professional contexts, people with higher self-esteem are more likely to work harder based on negative feedback, are less negatively affected by work stress, can handle workplace conflict better, and can work independently and solve problems (DeHart & Pelham, 2007). Self-esteem is not the only factor contributing to our self-concept; perceptions about our competence also play a role in developing our sense of self.

Self-Efficacy

Self-efficacy refers to people’s judgments about their ability to perform a task within a specific context (Bandura, 1997). Judgments about our self-efficacy influence our self-esteem, which influences our self-concept. The following example illustrates these interconnections.

Pedro did an excellent job on his first college speech. During a meeting with his professor, Pedro indicates he is confident going into the following speech and thinks he will do well. This skill-based assessment indicates that Pedro has a high level of self-efficacy related to public speaking. If he does well, the praise from his classmates and professor will reinforce his self-efficacy and lead him to evaluate his speaking skills, contributing to his self-esteem positively. By the end of the class, Pedro likely thinks of himself as an excellent public speaker, which may become an important part of his self-concept. Throughout these connection points, it is important to remember that self-perception affects how we communicate, behave, and perceive others. Pedro's increased self-efficacy may give him more confidence in his delivery, which will likely result in positive feedback reinforcing his self-perception. He may start to perceive his professors more positively since they share an interest in public speaking, and he may notice other people's speaking skills more during class presentations and public lectures. Over time, he may start thinking about changing his major to communication or pursuing career options incorporating public speaking, which would further integrate being "a good public speaker" into his self-concept. You can see that these interconnections can create powerful positive or negative cycles. While some of this process is under our control, much of it is also shaped by the people in our lives.

The verbal and nonverbal feedback we get from people affects our feelings of self-efficacy and our self-esteem. As we saw in Pedro's example, giving positive feedback can increase our self-efficacy, making us more likely to engage in a similar task in the future (Hargie, 2011). Negative feedback can lead to decreased self-efficacy and a declining interest in engaging with the activity again. People generally adjust their expectations about their abilities based on feedback from others. Positive feedback tends to make people raise their expectations for themselves, and negative feedback does the opposite, ultimately affecting behaviours and creating the cycle. When feedback from others differs from how we view ourselves, additional cycles may develop that impact self-esteem and self-concept.

Self-discrepancy theory states that people have beliefs about and expectations for their actual and potential selves that do not always match up with what they experience (Higgins, 1987). To understand this theory, we must understand the different "selves" that make up our self-concept, which are actual, ideal, and ought selves. The actual self consists of attributes you or someone else believes you

possess. The ideal self consists of attributes you or someone else would like you to possess. The ought self consists of the attributes you or someone else believes you should possess. These different selves can conflict with each other in various combinations. Discrepancies between the actual and ideal or ought selves can motivate in some ways and prompt people to act for self-improvement. For example, if your ought self should volunteer more for the local animal shelter, your actual self may be more inclined to do so. Discrepancies between the ideal and ought selves can be incredibly stressful. For example, many professional women who are also mothers have an ideal view of self, including professional success and advancement. They may also have an ought self that includes a sense of duty and obligation to be a full-time mother. The actual self maybe someone who does okay at both but does not quite live up to the expectations of either. These discrepancies do not just create cognitive unease — they also lead to emotional, behavioural, and communicative changes.

When we compare the actual self to the expectations of ourselves and others, we can see particular emotional and behavioural effects patterns. When our actual self does not match up with our ideals of self, we are not obtaining our desires and hopes, which can lead to feelings of sadness, including disappointment, dissatisfaction, and frustration. For example, if your ideal self has no credit card debt and your actual self does, you may be frustrated with your lack of financial discipline and be motivated to stick to your budget and pay off your credit card bills.

When our actual self does not match up with other people's ideals for us, we may not be obtaining significant others' desires and hopes, which can lead to feelings of sadness, including shame, embarrassment, and concern for losing the affection or approval of others. For example, if a significant other sees you as an "A" student and you obtain a 2.8 GPA in your first year of post-secondary studies, you may be embarrassed to share your grades with that person.

When our actual self does not match what we think other people think we should be, we are not living up to the self that we think others have constructed for us, which can lead to agitation, feeling threatened, and fear of potential punishment. For example, suppose your parents think you should follow in their footsteps and take over the family business, but your actual self wants to enter the military. In that case, you may be unsure of what to do and fear being isolated from the family. Finally, when our actual self does not match up with what we think we should be,

we are not meeting what we see as our duties or obligations, which can lead to feelings of agitation, including guilt, weakness, and a feeling that we have fallen short of our moral standard (Higgins, 1987). The following is a review of the four potential discrepancies between selves:

- **Actual versus own ideals**. We feel we are not obtaining our desires and hopes, leading to disappointment, dissatisfaction, and frustration.
- **Actual versus others' ideals**. We have an overall feeling that we are not obtaining significant others' desires and hopes for us, which leads to feelings of shame and
  embarrassment.
- **Actual versus others' ought**. We feel that we are not meeting what others see as our duties and obligations, leading to agitation, including fear of potential punishment.
- **Actual versus own ought**. We feel that we are not meeting our duties and obligations, which can lead to a feeling that we have fallen short of our moral standards.

Influences on Self-Perception

We have already learned that other people influence our self-concept and self-esteem. While interactions with individuals and groups are important to consider, we must also note the influence that larger, more systemic forces have on our self-perception. Social and family influences, culture, and the media all shape who we think we are and how we feel about ourselves. Although these are powerful socializing forces, there are ways to maintain some control over our self-perception

Social and Family Influences

Various forces help socialize us into our social and cultural groups and play a powerful role in presenting us with options about who we can be. While we may like to think that our self-perception starts with a blank canvas, our perceptions are limited by our experiences and various social and cultural contexts. Parents and peers shape our self-perceptions in positive and negative ways. The feedback from

significant others, including close family, can lead to positive self-views (Hargie, 2011). In the past few years, however, there has been a public discussion and debate about how much positive reinforcement people should give others, especially children. The following questions have been raised: Do we have current and past generations that have been overpraised? Is the praise warranted? What are the positive and negative effects of praise? What is the end goal of the praise? Let's briefly look at this discussion and its connection to self-perception.

Whether praise is warranted or not is subjective and specific to each person and context, but questions have been raised about the potential adverse effects of too much praise. Motivation is the underlying force that drives us to do things. Sometimes we are intrinsically motivated, meaning we want to do something for the love of doing it or for the resulting internal satisfaction. Other times we are extrinsically motivated, meaning we do something to receive a reward or avoid punishment. If you put effort into completing a short documentary for a class because you love filmmaking and editing, you have been motivated mainly by intrinsic forces. If you complete the documentary because you want an "A" and know that if you fail, your parents will not give you money for your spring break trip, you are motivated by extrinsic factors. Both can, of course, effectively motivate us. Praise is a form of extrinsic reward. Some people speculate that intrinsic motivation will suffer if an actual reward is associated with praise, such as money or special recognition. But what is so good about intrinsic motivation? Intrinsic motivation is more substantial and long-lasting than extrinsic motivation and can lead to developing a work ethic and a sense of pride in one's abilities. Intrinsic motivation can motivate people to accomplish great things over long periods and be happy despite the effort and sacrifices. Extrinsic motivation dies when the reward stops. Additionally, too much praise can lead people to have a misguided sense of their abilities. College professors who are reluctant to fail students who produce failing work may be setting those students up to be shocked when their supervisor critiques their abilities or output once they are in a professional context (Hargie, 2011).

There are cultural differences in the amount of praise and positive feedback teachers, and parents give their children. For example, teachers provide less positive reinforcement in Japanese and Taiwanese classrooms than in Canadian classrooms. Chinese and Kenyan parents do not regularly praise their children because they fear it may make them too individualistic, rude, or arrogant (Wierzbicka, 2004). So

the phenomenon of overpraising is not universal, and the debate over its potential effects is unresolved.

Research has also found that communication patterns develop between parents and children that are common to many verbally and physically abusive relationships. Such patterns negatively affect a child's self-efficacy and self-esteem (Morgan & Wilson, 2007). As you will recall, attributions are links we make to identify the cause of a behaviour. Aggressive or abusive parents cannot distinguish between mistakes and intentional behaviours, often seeing honest mistakes as intended and reacting negatively to the child. Such parents also communicate generally negative evaluations to their children by saying, for example, "You cannot do anything right!" or "You are a bad child." When children exhibit positive behaviours, abusive parents are more likely to use external attributions that diminish the child's achievement by saying, for example, "You only won because the other team was off their game." In general, abusive parents have unpredictable reactions to their children's positive and negative behaviour, which creates an uncertain and often scary climate for a child that can lead to lower self-esteem and erratic or aggressive behaviour. The cycles of praise and blame are just two examples of how the family as a socializing force can influence our self-perceptions.

Culture

How people perceive themselves varies across cultures. For example, many cultures exhibit a phenomenon known as the self-enhancement bias, meaning that we tend to emphasize our desirable qualities relative to other people (Loughnan et al., 2011). But the degree to which people engage in self-enhancement varies. A review of many studies in this area found that people in Western countries such as Canada and the United States were significantly more likely to self-enhance than people in countries such as Japan. Many scholars explain this variation using a standard measure of cultural variation that claims people in individualistic cultures are more likely to engage in competition and openly praise accomplishments than people in collectivistic cultures. The difference in self-enhancement has also been tied to economics, with scholars arguing that people in countries with greater income inequality are more likely to view themselves as superior to others or want to be perceived as superior to others (even if they do not have economic wealth) to

conform to the country's values and norms. This holds true because countries with high levels of economic inequality, such as Canada and the United States, typically value competition and the right to boast about winning or succeeding. In contrast, countries with more economic equality, such as Japan, have a cultural norm of modesty (Loughnan et al., 2007).

Race also plays a role in self-perception. For example, positive self-esteem and self-efficacy are higher in African American adolescent girls than Caucasian girls (Stockton et al., 2009). Self-perception becomes more complex when considering biracial individuals— specifically those born to couples comprising an African American and a white parent (Bowles, 1993). In such cases, it is challenging for biracial individuals to embrace both heritages and social comparison becomes more difficult due to diverse and sometimes conflicting reference groups. Since many biracial individuals identify as and are considered African American by society, living and working within a black community can help foster more positive self-perceptions in these biracial individuals. Such a community offers a more nurturing environment and a buffer zone from racist attitudes but simultaneously distances biracial individuals from their white identity. Conversely, immersion into a predominantly white community and separation from a black community can lead biracial individuals to internalize negative views of people of colour and perhaps develop a sense of inferiority. Gender intersects with culture and biracial identity to create different experiences and challenges for biracial men and women. Biracial men have more difficulty accepting their potential occupational limits, especially if they have white fathers, and biracial women have difficulty accepting their black features, such as hair and facial features. All these challenges lead to being marginalized from both ethnic groups and interfere with developing positive self-esteem and a stable self-concept.

Some general differences in gender and self-perception relate to self-concept, self-efficacy, and envisioning ideal selves. As with any cultural differences, these are generalizations supported by research but do not represent all individuals within a group. Regarding self-concept, men are more likely to describe themselves regarding their group membership, and women are more likely to include references to relationships in their self-descriptions. For example, a man may note that he is a boat enthusiast or a member of the Rotary Club, and a woman may note that she is a mother of two or a loyal friend.

Regarding self-efficacy, men tend to have higher perceptions of self-efficacy than women (Bowles, 1993). In terms of actual and ideal selves, men and women in a variety of countries both described their ideal selves as more masculine (Best & Thomas, 2004). Gender differences are interesting to study but are often exaggerated beyond the actual variations. Socialization and internalization of societal norms for gender differences account for much more of our perceived differences than innate or natural differences between genders. These gender norms may be explicitly stated — for example, a mother may say to her son, "Boys do not play with dolls," or they may be more implicit, with girls being encouraged to pursue historically feminine professions such as teaching or nursing without others stating the expectation.

Media

The representations we see in the media affect our self-perception. The vast majority of media images include idealized representations of attractiveness. Even though the images of people we see in glossy magazines and on movie screens are not typically what we see when we look at the people around us in a classroom, at work or the grocery store, many of us continue to hold ourselves to an unrealistic standard of beauty and attractiveness. Movies, magazines, and television shows are filled with beautiful people, and less attractive actors (when present in the media) are typically portrayed as the butt of jokes, villains, or only as background extras (Patzer, 2008). Aside from overall attractiveness, the media also offers narrow representations of acceptable body weight. Researchers have found that only 12 percent of prime-time characters are overweight, which is dramatically less than the national statistics for obesity among the actual population (Patzer, 2008). Further, an analysis of how weight is discussed on prime-time sitcoms found that heavier female characters were often the targets of negative comments and jokes that audience members responded to with laughter. Conversely, positive comments about women's bodies were related to their thinness. In short, the heavier the character, the more negative the comments, and the thinner the character, the more positive the comments. The same researchers analyzed sitcoms for content regarding male characters' weight. They found that although comments were made, they were fewer in number and not as harmful, ultimately supporting the notion that overweight male characters are more accepted in

media than overweight female characters. In recent years, much more attention has been paid to the potential negative effects of such narrow media representations.

Regarding self-concept, media representations guide us on what is acceptable, unacceptable, or not valued in our society. Mediated messages reinforce cultural stereotypes about race, gender, age, sexual orientation, ability, and class. People from historically marginalized groups must look much harder than dominant groups to find positive representations of their identities in media. As a critical thinker, it is essential to question media messages and examine who is included and excluded. Advertising, in particular, encourages people to engage in social comparison, regularly communicating that we are inferior because we lack a certain product or that we need to change some aspect of our lives to keep up with and be similar to others. For example, for many years, advertising targeted to women instilled in them a fear of having a dirty house, selling them products that promised to keep their home clean, make their family happy, and impress their friends and neighbours. Now messages tell us to fear becoming old or unattractive, selling products to keep our skin tight and clear, which will, in turn, make us happy and popular.

Beware of Self-fulfilling Prophecy

A **self-fulfilling prophecy** occurs when your expectation *causes* something to happen. Suppose your colleagues tell you that there is a new staff member that started last week. When you ask them what they thought of the new staff member, they describe the person as aloof and rude.

Later in the day, you run into a new staff member. Based on the description you heard from your colleagues, you say “Excuse me” in an aggressive manner and push your way into the space. The new staff member gives you a harsh look and leaves quickly. The next time you see your friends, tell them you met the new staff member and agree with their assessment.

Was your new staff member aloof and rude? Or did you treat the new staff member so that your preconceived notion would be fulfilled? If so, it is a self-fulfilling prophecy.

Sometimes our expectations (or the expectations of others) can influence our communication behaviours. In the example above, the information you received from your colleagues affected how you interacted with the new staff member. How might things have been different if you knew nothing about the new staff member before you met? Would you have communicated in a friendlier manner? If you had, would the new staff member react differently? It is difficult to say what would have happened. But it is important to remember that the feedback we receive about others may not be accurate. We may create a self-fulfilling prophecy if we communicate with others based on inaccurate information.

Self-Disclosure and Interpersonal Communication

Have you ever said too much on a first date? At a job interview? To a professor? Have you ever posted something on social media only to return it later to remove it? When self-disclosure works out well, it can positively affect interpersonal relationships. Conversely, self-disclosure that does not work out well can lead to embarrassment, lower self-esteem, and relationship deterioration or even termination. As with all other types of communication, increasing your competence regarding self-disclosure can have many positive effects.

So what is self-disclosure? It could be argued that verbal or nonverbal communication reveals something about the self. The clothes we wear, a laugh, or an order at the drive-through may offer glimpses into our personality or past, but they are not necessarily self-disclosure. **Self-disclosure** is the purposeful disclosure of personal information to another person. If someone purposefully wears the baseball cap of their favourite team to reveal their team loyalty to a new friend, this clothing choice constitutes self-disclosure. Self-disclosure does not always have to be deep to be useful or meaningful. Superficial self-disclosure, often in the form of “small talk,” is key in initiating relationships that move to more personal levels of self-disclosure. Telling a classmate your major or your hometown during the first week of school carries relatively little risk but can build into a friendship that lasts beyond the class.

Self-Disclosure Theories

Social penetration theory states that as we get to know someone, we engage in a reciprocal process of self-disclosure that changes in breadth and depth and affects how a relationship develops. Depth refers to how personal or sensitive the information is, and breadth refers to the topics discussed (Green et al., 2006). You may recall in the movie *Shrek* that, Shrek declares that *ogres are like onions*. While certain circumstances can lead to a rapid increase in the depth or breadth of self-disclosure, social penetration theory states that in most relationships, people gradually penetrate through the layers of each other's personality like we peel the layers from an onion.

The theory also argues that people in a relationship balance needs that are sometimes in tension, which is a dialectic. Balancing a dialectic is like walking a tightrope. You have to lean to one side and eventually lean to another side to keep yourself balanced and prevent falling. The constant back and forth allows you to stay balanced, even though you may not always be even or standing straight up. One of the critical dialectics that must be negotiated is the tension between openness and closedness (Green et al., 2006). We want to make ourselves open to others through self-disclosure and maintain a sense of privacy.

We may also engage in self-disclosure for social comparison. **Social comparison theory** states that we evaluate ourselves based on how we compare with others (Hargie, 2011). We may disclose information about our intellectual aptitude or athletic abilities to see how we relate to others. This type of comparison helps us decide whether we are superior or inferior to others in a particular area. Disclosures about abilities or talents can also lead to self-validation if the person to whom we disclose reacts positively. By disclosing information about our beliefs and values, we can determine if they are the same as or different from others. Last, we may disclose fantasies or thoughts to another to determine whether they are acceptable or unacceptable. We can engage in social comparison as the discloser or the receiver of disclosures, which may allow us to determine whether or not we are interested in pursuing a relationship with another person.

The final theory of self-disclosure that we will discuss is the **Johari window**,

Who are you? How do you see yourself? How do others see you? You are more

than your actions and more than your communication, and the result may be greater than the sum of the parts, but how do you know yourself? For many, these questions can prove challenging as we try to reconcile the self-concept we perceive with what we desire others to perceive about us, as we try to see ourselves through our interactions with others. As we come to terms with the idea that we may not be aware or know everything, there is to know about ourselves.

What do we know about ourselves? What aspects of ourselves do we share with others? What aspects of ourselves are yet to be determined? In 1955, psychologists Joseph Luft and Harry Ingham created a model known as the Johari window to visually represent the aspects of self that are known to us versus those unknown. Their model has four quadrants (Figure 2.1.1).

In **the first quadrant** (lower left-hand corner) are those ideas known to self and others. This quadrant is considered the *open area* and likely includes concepts like your name, hobbies, and other topics about yourself that you freely share with others. If you have a social media account, the messages you post publicly will fall into this quadrant.

In **the second quadrant** (upper left-hand corner) are those ideas that are unknown to self but known to others. This quadrant is considered the *blind area*. This area might be easier to think about in terms of others. Do you have a friend, coworker, or sibling who comes off as abrasive but does not know it? Or maybe you know someone who is a pushover but does not see it. Do you think that their lack of recognition affects their understanding of self? Now, let's think about it in terms of ourselves. What are our blind spots? These aspects of our personality (that others readily know) but escape our notice fall into this area of the Johari window. Perception checking and soliciting feedback from others can help us learn more about our blind area.

In **the third quadrant** (upper right-hand corner) are those ideas unknown to self and others. This quadrant is considered an *unknown area*. This area includes things you and others do not know (yet). How will you cope with the loss of a parent (if both your parents are living)? What type of parent will you be (if you don't have children)? How successful will your career be (if you are in university and have not started a career yet)? Because these things have not happened yet, the outcome is unknown. To become more self-aware, we must solicit feedback from others to

learn more about our blind pane, but we must also explore the unknown pane. To discover the unknown, we must get out of our comfort zones and try new things. We must pay attention to the things that excite or scare us and investigate them more to see if we can learn something new about ourselves. By being more aware of what is contained in these panes and how we can learn more about each one, we can more competently engage in self-disclosure and use this process to enhance our interpersonal relationships.

In **the fourth quadrant** (lower right-hand corner) are those ideas that are known to self but unknown to others. This quadrant is considered the *hidden area* and includes things you know about yourself that you do not share with others (i.e., traumas you have experienced, emotional insecurities, embarrassing situations, and so on). As we get to know someone, we self-disclose and move information from the "hidden" to the "known" pane. Doing this decreases the size of our hidden and known areas, increasing our shared reality. The reactions we get from people as we open up to them help us form our self-concepts and also help determine the trajectory of the relationship. If the person reacts favourably to our disclosures and reciprocates disclosure, the disclosure cycle continues, and a deeper connection may be forged.



Figure 2.1.1 Luft and Ingram's Dimensions of Self. Image Description (see Appendix A 2.1.1).

These dimensions of self remind us that we are not fixed — that freedom to change combined with the ability to reflect, anticipate, plan, and predict allows us to

improve, learn, and adapt to our surroundings. By recognizing that we are not fixed in our "self" concept, we come to terms with the responsibility and freedom inherent in our potential humanity.

In health studies communication, the self plays a central role. How do you describe yourself? Do your career path, job responsibilities, goals, and aspirations align with what you recognize to be your talents? How you represent "self" through your CV, in your writing, your articulation, and in a presentation — these all play an essential role as you negotiate the relationships and climate present in any organization.

Understanding your perspective can lend insight into your awareness — the ability to be conscious of events and stimuli. Awareness determines what you pay attention to, how you carry out your intentions, and what you remember of your activities and experiences each day. Awareness is complicated and fascinating, especially how we take in information, give it order, and assign it meaning.

Self-Disclosure and Social Media

Facebook and Instagram are undoubtedly dominating the world of online social networking, and the willingness of many users to self-disclose personal information ranging from moods to religious affiliation, relationship status, and personal contact information has led to an increase in privacy concerns. Facebook and Instagram offer convenient opportunities to stay in touch with friends, family, and coworkers, but are people using them responsibly? Some argue fundamental differences exist between today's digital natives and older generations, whose private and public selves are intertwined through these technologies. Even though some colleges offer seminars on managing privacy online, we still hear stories of self-disclosure gone wrong, such as the football player from the University of Texas who was kicked off the team for posting racist comments about the president or the student who was kicked out of his private, Christian college after a picture of him dressed in drag surfaced on Facebook. However, social media experts say these cases are rare and that most students know who can see what they are posting and the potential consequences. The issue of privacy management on Facebook affects parent-child relationships, too, and as the website "Oh Crap. My Parents Joined Facebook" shows, the results can sometimes be embarrassing for the student and

the parent as they balance the dialectic between openness and closeness once the child has moved away.

The Process of Self-Disclosure

Many decisions go into the process of self-disclosure. We have many types of information we can disclose, but we have to determine whether or not we will proceed with disclosure by considering the situation and the potential risks. Then we must decide when, where, and how to disclose. Since all these decisions affect our relationships, we will examine each in turn.

Four main categories for disclosure include observations, thoughts, feelings, and needs (Hargie, 2011). Observations include what we have done and experienced. For example, someone could tell you they live in a farmhouse in Alberta. If they told you that moving from the city to the country was a good decision, they would share their thoughts because they included a judgment about their experience. Sharing feelings includes expressing an emotion — for example, "I am happy to wake up every morning and look out at the grain fields. I feel lucky." Last, we may communicate needs or wants by saying, "My best friend is looking for a job, and I want him to move here, too." We usually begin disclosure with observations and thoughts and then move on to feelings and needs as the relationship progresses. There are some exceptions to this. For example, we are more likely to disclose sincerely in crises, and we may also disclose more than usual with a stranger if we do not think we will meet the person again or do not share social networks. Although we do not often find ourselves in crises, you may recall scenes from movies or television shows where people trapped in an elevator or stranded after a plane crash reveal their deepest feelings and desires. I imagine we have all been in a situation where we said more about ourselves to a stranger than we usually would. To better understand why, let's discuss factors influencing our disclosure decision.

Generally speaking, some people are naturally more transparent and willing to self-disclose, while others are more opaque and hesitant to reveal personal information (Jourard, 1964). Interestingly, research suggests that the pervasiveness of reality television, much of which includes participants who are very willing to disclose personal information, has led to a general trend among reality television viewers to engage in self-disclosure through other mediated means such as blogging and

video sharing (Stefanone & Lackaff, 2009). Whether online or face-to-face, there are other reasons for disclosing or not, including self-focused, other-focused, interpersonal, and situational (Green et al., 2006).

Self-focused reasons for disclosure include having a sense of relief or catharsis, clarifying or correcting information, or seeking support. Self-focused reasons for not disclosing include fear of rejection and loss of privacy. In other words, we may disclose to get something off our chest in hopes of finding relief, or we may not disclose out of fear that the other person may react negatively to our revelation. Other-focused reasons for disclosure include a sense of responsibility to inform or educate. Other-focused reasons for not disclosing include feeling like the other person will not protect the information. If someone mentions that their car would not start this morning and you disclose that you are good at working on cars, you have disclosed to help the other person. Conversely, you may hold back disclosure about your new relationship from your coworker because they are known to be loose-lipped with other people's information. Interpersonal reasons for disclosure involve desires to maintain a trusting and intimate relationship. Interpersonal reasons for not disclosing include fear of losing the connection or deeming the information irrelevant to the relationship. Finally, situational causes may include the other person being available, directly asking a question, or being directly involved in or affected by the disclosed information. Situational reasons for not disclosing include the person being unavailable, lacking time to discuss the information thoroughly, or lacking a suitable (i.e., quiet, private) place to talk. For example, finding yourself in a quiet environment where neither person is busy could lead to disclosure, while a house full of company may not.

Deciding when to disclose something in a conversation may not seem as important as determining whether or not to disclose it. But choosing to disclose and then doing it at an awkward time in a conversation could lead to negative results. Regarding timing, you should consider disclosing the information early, mid, or late in a discussion (Greene et al., 2006). If you get something off your chest early in a conversation, you may ensure plenty of time to discuss the issue and that you do not lose your nerve. If you wait until the middle of the conversation, you have some time to feel the other person's mood and set up the tone for your disclosure. For example, if you meet up with your roommate to tell her that you're planning on moving out, and she starts by saying, *"I have had the most terrible day!"* the tone of the conversation has now shifted, and you may not end up making your

disclosure. If you start by asking your roommate how she is doing, and things seem to be going well, you may be more likely to follow through with the disclosure. You may disclose late in a conversation if you are worried about the person's reaction, if you know they have an appointment, or if you must go to class at a particular time; disclosing just before that time could limit your immediate exposure to any adverse reaction. However, if the person does not react negatively, they could still become upset because they do not have time to discuss the disclosure with you.

Sometimes self-disclosure is unplanned. Someone may ask you a direct question or disclose personal information, which leads you to reciprocate disclosure. In these instances, you may not manage your privacy well because you have not had time to consider any potential risks. In the case of a direct question, you may feel comfortable answering, giving an indirect or general answer, or feeling enough pressure or uncertainty to give a dishonest answer. If someone unexpectedly discloses, you may need to reciprocate by disclosing something personal. If you are uncomfortable doing this, you can still support the other person by listening and giving advice or feedback.

Once you have decided when and where to disclose information to another person, you must figure out the best channel. Face-to-face disclosures may feel more genuine or intimate, given the shared physical presence and ability to receive verbal and nonverbal communication. There is also an opportunity for immediate verbal and nonverbal feedback, such as asking follow-up questions or demonstrating support or encouragement through a hug. The immediacy of a face-to-face encounter also means you have to deal with the uncertainty of the reaction you will get. If the person reacts negatively, you may feel uncomfortable, pressured to stay, or even fearful. You may seem less genuine or personal if you choose a mediated channel such as an email or a letter, text, note, or phone call. Still, you have more control over the situation in that you can take time to choose your words carefully, and you do not have to face the reaction of the other person immediately. This can be beneficial if you fear an adverse or potentially violent reaction. Another disadvantage of choosing a mediated channel is the loss of nonverbal communication which can add many contexts to a conversation. Although our discussion of the choices involved in self-disclosure so far has focused primarily on the discloser, self-disclosure is an interpersonal process that has much to do with the receiver of the disclosure.

Effects of Disclosure on the Relationship

The process of **self-disclosure is circular.** An individual self-discloses, the disclosure recipient reacts, and the original discloser processes the reaction. The critical elements of the process are how the receiver interprets and responds to the disclosure. Part of the response results from the receiver's attribution (reason) of the cause of the disclosure, which may include dispositional, situational, and interpersonal attributions (Jiang et al., 2011).

Let's say your coworker discloses that she thinks the new boss got his promotion because of favouritism instead of merit. You may make a dispositional attribution that connects the cause of her disclosure to her personality by thinking, for example, that she is outgoing, inappropriate for the workplace, or fishing for information. If the personality trait to which you attribute the disclosure is positive, then your reaction to the disclosure is more likely to be positive. Situational attributions identify the cause of a disclosure with the context or surroundings in which it takes place. For example, you may attribute your coworker's disclosure to the fact that you agreed to go to lunch with her. Interpersonal attributions identify the relationship between the sender and receiver as the cause of the disclosure. So if you attribute your coworker's comments to the fact that you are best friends at work, you think your unique relationship caused the disclosure. Suppose the receiver's primary attribution is interpersonal. In that case, relational intimacy and closeness will likely be reinforced more than if the attribution is dispositional or situational because the receiver feels they were specially chosen to receive the information.

The receiver's role does not end with attribution and response. There may be added burdens if the information shared with you is a secret. As was noted earlier, there are clear risks involved in the self-disclosure of intimate or potentially stigmatizing information if the receiver of the disclosure fails to keep that information secure. As the receiver of a secret, you may need to unburden yourself from the co-ownership of the information by sharing it with someone else (Derlega et al., 1993). This is not always a bad thing. You may strategically tell someone who is removed from the social network of the person who told you the secret to keep the information secure. Although unburdening yourself can be a relief, sometimes people tell secrets they were entrusted with keeping for less productive reasons. A research study of office

workers found that 77 % of workers who received disclosure and were told not to tell anyone else told at least two other people by the end of the day! (Hargie, 2011). They reported doing so to receive attention for having inside information or to demonstrate their power or connection. Spreading someone's private disclosure without permission for personal gain does not demonstrate communication competence.

When the disclosure cycle goes well for the discloser, there will likely be a greater sense of relational intimacy and self-worth. There are also positive psychological effects, such as reduced stress and increased feelings of social support.

Self-disclosure can also have effects on physical health. Spouses of suicide or accidental death victims who did not disclose information to their friends were more likely to have more health problems, such as weight change and headaches and suffer from more intrusive thoughts about the death than those who did talk with friends (Greene et al., 2006).

Alternatives to Self-Disclosure

So, what techniques can you use if you do not want to self-disclose to others? **First, you can use deception.** Sometimes people lie to avoid conflict. This is true in cases where the person may become extremely upset. They can lie to gain power or to save face. They can also lie to guide the interaction. Of course, there is also the benevolent lie (sometimes called a "white" lie). This is a lie done to save someone else's face. It is not done to help oneself but to avoid hurting someone else. Imagine, for example, your grandma bakes you cookies and is so happy she can give them to you, but you do not like them. Do you tell her that or lie and tell her you are glad she made them for you?

Second, you can equivocate. This means you don't answer the question or give your comments. Instead, you restated what they said differently. For instance, Sally says, "How do you like my new dress?" you can say, "Wow! That's a new outfit!" In this case, you do not express your feelings or opinions. You only offer the information that has been provided to you.

Third, you can hint. You may not want to lie or equivocate to someone you care

about. You might use indirect or face-saving comments. For example, if your roommate has not helped you clean your apartment, you might say things like, “It sure is messy in here,” or “This place could use some cleaning.”

A fourth alternative is silence. Simply not saying anything at all.

Impression Management

How we perceive ourselves manifests in how we present ourselves to others. Impression management strategically conceals or reveals personal information to influence others’ perceptions (Human et al., 2012). We engage in this process daily and for different reasons. In his seminal 1959 book, The Presentation of Self in Everyday Life, Sociologist Erving Goffman opened up the conversation about impression management, which he called “facework,” with the idea that impression management is about figuring out the “face” you want to present to the world. Goffman also noted that we are all essentially performers on a stage, adjusting our performance to help shape how others see and respond to us.

Although people occasionally intentionally deceive others in managing impressions, we generally try to make a good impression while remaining authentic. Since impression management helps meet our practical, relational, and identity needs, we stand to lose quite a bit if we are caught intentionally misrepresenting ourselves. In May of 2012, Yahoo!’s CEO resigned after it became known that he stated on official documents that he had two college degrees when he only had one. In a similar incident, a woman who had long served as the dean of admissions for the prestigious Massachusetts Institute of Technology was dismissed from her position after it was learned that she had only attended one year of college and had falsely indicated she had a bachelor’s and master’s degree (Webber & Korn, 2012). Such incidents clearly show that although people can get away with such false impression management for a while, the eventual consequences of being found out are dire. As communicators, we sometimes engage in more subtle inauthentic impression management. For example, a person may say they know more about a subject or situation than they do to seem wise or “in the loop.” A speaker works on a polished and competent delivery during a speech to distract from a lack of substantive content. These cases of strategic

impression management may never be found out, but communicators should still avoid them as they do not live up to the standards of ethical communication.

Consciously and competently engaging in impression management can benefit us by giving others a more positive and accurate picture of who we are. People skilled in impression management are typically more engaging and confident, allowing others to pick up on cues from which to form impressions (Human et al., 2012). Being a skilled impression manager draws on many practices of competent communicators, including becoming a higher self-monitor. When impression management and self-monitoring skills combine, communicators can simultaneously monitor their expressions, the reaction of others, and the situational and social context (Sosik et al., 2002). Sometimes people get help with their impression management. Although most people can't afford or would not consider hiring an image consultant, some generously donated their impression management expertise to help others. For example, a project called "Style Me Hired" offered free makeovers to jobless people to offer them new motivation and help them make favourable impressions and hopefully get a job offer.

Characteristics of Impression Management

Based on Goffman's work, our own experiences, and the research done since Goffman's time, we can identify a few characteristics of impression management (Adler & Proctor, 2017). For example, we know that we have more than one "face" that we present to the world. For example, you may have one face you use as a student, another as an employee, another as a friend, and so on. At the core of your being, though, you have a sense of who you are and how you perceive yourself, which we know is our self-concept. Of course, there will be elements of your self-concept in the faces you present to the world, but as discussed in the previous disclosure section, you may not choose to share all of who you are with everyone you meet.

Another characteristic relates to Goffman's comparison to people as performers concerning impression management. As we respond to or attempt to influence how others see us, impression management involves a partnership with those around us. For example, if a person wears a new outfit and no one comments on it, they might think that no one liked it and thus not wear it again. Conversely, if

they receive many compliments on the outfit, they may wear it more often and buy other clothes in a similar style. We can also see this happening on social media when people post on their accounts. If the post receives little attention, they might delete it or not post similarly to that again. But if a post is successful, mainly if it goes viral, the person will likely attempt to create similar posts.

Of course, as is true with communication in general, our impression management can be intentional or unintentional. Carefully choosing what to wear for a job interview is a deliberate form of impression management. Not realizing the joke you just told was offensive to some people who heard it would be an unintentional form of impression management. This also connects to the Johari Window model, as unintentional impression management would be in the blind area, whereas intentional impression management could be in the open or hidden areas. The hidden area is included because those around you might not be aware of how much effort went into your impression management or how important their impression of you is to you.

Categories of Impression Management

There are three categories of how we manage others' impressions of us: manner, appearance, and setting (Goffman, 1959).

Manner

Manner refers to our words and actions. The words we choose to use and how we speak them are manners. An example: a person excitedly told a friend about a new book about acting they had read by Uta Hagen. They had only seen the author's name written, not heard it pronounced, so they said her name as "You-Ta Hāgen." The friend, who was very kind not to make fun, said, "Oh, I've also heard it pronounced, "U-ta Hog-en." Of course, that pronunciation was correct. But the mispronunciation created an unintentional impression about the speaker, specifically their education level. We will talk more about manners when we look at how we convey meaning through the words we use and how we say them. That includes tone, volume, rate, pronunciation, accent, and emphasis. It also includes our posture, gestures, and distance (including the use of personal space) when

we think of actions. All of these convey more than meaning; they also create impressions in the minds of those who perceive our words and our actions.

Appearance

Appearance refers to our clothing and other aspects of our personal appearance. What you wear, how you style your hair, and whether or not you wear makeup are all a part of your appearance and influence how people perceive you.

Appearance conveys more than just a look; it also can convey meaning. For example, wearing an Oilers t-shirt shows that you are a fan of the team.

Sometimes we may not think much about our appearance. Indeed, if students are asked in class about who carefully picked out the outfit they wore to the class that day, there may only be one or two students who raise their hands. But other times, we give a lot of attention to our appearance — a date, for example, or a formal event such as a wedding or graduation. Job interviews are another time when a person carefully dresses for their desired job.

Setting

The **setting** is how we decorate our homes and offices and refers to the cars we drive. Indeed, the material objects and people surrounding a person influence our perception. The link between environmental cues and perception is important enough that many companies create policies about what can and cannot be displayed in personal office spaces. For example, it would seem odd for a healthcare environment to have a movie poster hanging in a waiting area. This would influence clients' perceptions of the healthcare provider's personality and credibility. The arrangement of furniture also creates impressions. Walking into a meeting and sitting on one end of a long boardroom table is typically less inviting than sitting at a round table or sofa.

Think about the places you claim as your own — your home, an office, your car. Do they reflect who you are? Does your space invite people in or make them feel unwelcome?

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here: *https://openbooks.macewan.ca/professionalcommunication/?p=709#h5p-46*

Key Takeaways

- Self-concept involves multiple dimensions and is expressed in internal monologue and social comparisons.
- Self-esteem refers to how you perceive your value and worth.
- Through self-disclosure, we disclose personal information and learn about others.
- The social penetration theory argues that self-disclosure increases in breadth and depth as a relationship progresses, like peeling back the layers of an onion.
- We engage in social comparison through self-disclosure, which may determine whether or not we pursue a relationship.

Exercises

1. Define yourself in 20 words or less. Was it a challenge? Did your description focus on your characteristics, beliefs, actions, or other factors associated with you? If you compare your results with others, what did you observe?
2. Identify at least three of your firmly held beliefs. What is the foundation of those beliefs? Consider how your beliefs may differ from your clients and how this can influence your communication and therapeutic relationships.
3. Have you experienced negative results due to self-disclosure (as sender or receiver)? If so, what could have been altered in what, where, when, or how to disclose that may have improved the situation?
4. Under what circumstances is it okay to share information that someone has disclosed to you? Under what circumstances is not okay to share the information?

5. How does self-disclosure facilitate the therapeutic relationship in a professional healthcare environment?

Image Attributions

Figure 2.1.1 Luft, J., & Ingham, H. (1955). *The Johari Window: A graphic model for interpersonal relations*. University of California Western Training Lab.

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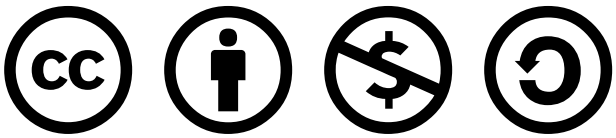
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2.2 Perception Process

Learning Objectives

- Define perception
- Explain the three stages of the perception process.
- Describe the relationship between interpersonal communication and perception.

Perception

Many of our problems in the world occur due to perception, or the process of attending to, organizing, and interpreting the information that comes in through your five senses (Wertz, 1982). Although perception is a primarily cognitive and psychological process, how we perceive the people and objects around us affects our communication. We respond differently to an object or person we perceive favourably than we do to something or someone we find unfavourable (Wertz, 1982). But how do we filter a vast amount of incoming information, organize it, and make meaning from the things that make it through our perceptual filters and into our social realities?

It is easier to make a concrete decision when we have all the facts. We have to rely on our perceptions to understand the situation. In this section, you will learn tools to help you understand perceptions and improve your communication skills. As you will see in many of the illustrations on perception, people can see different things. In some pictures, some might only be able to see one image, but others may see both images, and a small number of people might be able to see something completely different from others.

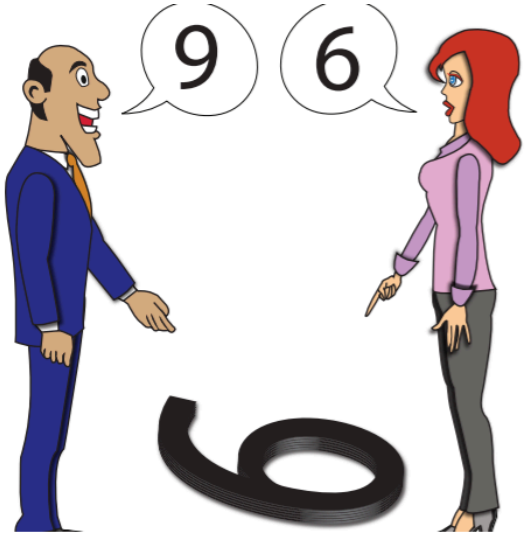


Figure 2.2.1. It's all about perception.

Many famous artists over the years have played with people's perceptions. The three figures below exemplify three artists' use of twisted perceptions. Danish psychologist Edgar Rubin initially created the first, commonly called The Rubin Vase. Essentially, you have what appears to be either a vase (the white part) or two people looking at each other (the black part). This simple image is both two images and neither image simultaneously. The second work of art is Charles Allan Gilbert's (1892) painting "All is Vanity." In this painting, you can see a woman sitting and staring at herself in the mirror. At the same time, the image is also a giant skull. Lastly, we have William Ely Hill's (1915) "My Wife and My Mother-in-Law," which may have been loosely based on an 1888 German postcard. In Hill's painting, you have two images, one of a young woman and one of an older woman. The painting was initially published in an American humour magazine called *Puck*. The caption "They are both in this picture — find them" ran alongside it. These visual images are helpful reminders that we don't always perceive things the same way as those around us. There are often multiple ways to view and understand the same events.

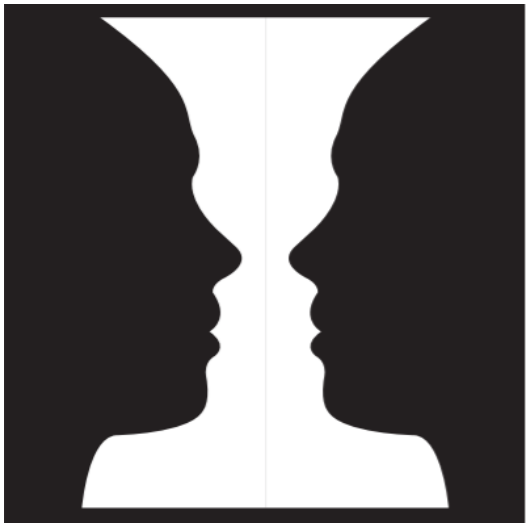


Figure 2.2.2 The Rubin Vase – based on Edgar John Rubin's (1915) "Vase Ambiguous Figure."



Figure 2.2.3. Charles Allan Gilbert (1892), "All is Vanity."



Figure 2.2.4. William Ely Hill (1915), "My Wife and My Mother-in-Law."

In interpersonal communication, you present a side of yourself each time you talk to other people. Sometimes this presentation accurately represents yourself, and other times it may be a false version of yourself. People present themselves in how they want others to see them. Some people present themselves positively on social media with beautiful relationships. Then, their followers or fans are shocked to learn that those images are inaccurate. If we only see one side of things, we might be surprised to learn that things are different.

Attending

We take in information through all five senses, but our perceptual field (the world around us) includes so many stimuli that our brains cannot process and make sense of it all. So, as information comes in through our senses, various factors influence which stimuli or information continues through the perception process (Fiske & Taylor, 1991).

The first step of the perception process is to select the information you want to pay attention to or focus on, which is called **attending**. You will pay attention to things based on their look, feel, smell, touch, and taste. At every moment, you are

obtaining a large amount of information. So, how do you decide what you want to pay attention to and what you choose to ignore? People will tend to pay attention to things that matter to them. Usually, we pay attention to things that are louder, larger, different, and more complex than we ordinarily view.

When we focus on a particular thing and ignore other elements, we call it selective perception. For instance, when you are in love, you might pay attention to only that special someone and not notice anything else. The same happens when we end a relationship and are devasted; we might see how everyone else is in a great relationship, but we are not.

You pay attention to certain things more than others for several reasons. We first pay attention to something because it is extreme or intense. In other words, it stands out of the crowd and captures our attention, like a beautiful person at a party or a big neon sign in a dark, isolated town. We cannot help but notice these things because they are exceptional or extraordinary in some way.

Second, we will pay attention to things that are different or contradicting. Commonly, when people enter an elevator, they face the doors. Imagine if someone entered the elevator and stood staring at you with their back to the elevator doors. You might pay attention to this person more than others because the behaviour is unusual. It is something you do not expect, making it stand out more. On another note, different might also mean something you are not used to or no longer exists for you. For instance, if someone very close to you passes away, you might pay more attention to that person's loss than anything else. Some people grieve for an extended period because they are so used to having that person around, and things can be different when you do not have them to rely on or ask for input.

Third, we pay attention to something that constantly repeats. Think of a catchy song or a commercial that continually repeats itself. We might be more alert to it since it repeats, compared to something only said once.

The fourth thing that we will pay attention to is based on our motives. One motive might be to lose weight, and you might pay more attention to exercise advertisements and food selection choices compared to someone who does not have the motive to lose weight. Our motives influence what we pay attention to and what we ignore.

The last thing that influences in the selection process is our emotional state. If we are in an angry mood, we might be more attentive to things that make us angrier. If we are in a happy mood, we will be more likely to overlook a lot of negativity because we are already excited. Selecting involves more than just paying attention to specific cues. It also means that you might be missing other things. For instance, people in love will think their partner is fantastic and overlook many flaws. This is expected behaviour. We are so focused on how wonderful they are that we often neglect the other negative aspects of their behaviour.

We also tend to pay attention to salient information. Salience is the degree to which something attracts our attention in a particular context. The thing attracting our attention can be abstract, like a concept, or concrete, like an object. For example, a bright flashlight shining in your face while camping at night is sure to be salient. The degree of salience depends on three features (Fiske & Tayor, 1991). We find visually or aurally stimulating salient things that meet our needs or interests. Lastly, expectations affect what we find salient.

Organizing

Think again about the three images above (2.2.2-2.2.4). What were the first things that you saw when you looked at each picture? Could you see the two different images? Which image was more prominent? When we examine a picture or image, we organize it in our head to make sense of it and define it. This is an example of **perceptual organization.** After we select the information we are paying attention to, we have to make sense of it in our brains. This stage of the perception process is referred to as organization. We must understand that information can be organized in different ways. After we attend to something, our brains quickly want to make sense of this data. We quickly want to understand the information we are exposed to and organize it in a way that makes sense.

There are four types of schemes that people use to organize perceptions. **First**, physical constructs classify people (e.g., young/old, tall/short, big/small). **Second**, role constructs are social positions (e.g., mother, friend, doctor, teacher). **Third**, interaction constructs are the social behaviours displayed in the interaction (e.g., aggressive, friendly, dismissive, indifferent). **Fourth**, psychological constructs are the

communicators' dispositions, emotions, and internal states of mind (e.g., depressed, confident, happy, insecure). We often use these schemes to understand and organize our received information. We use these schemes to generalize others and to classify information.

Let us pretend you came to class and noticed that one of your classmates was wildly waving their arms at you. This will most likely catch your attention because you find this behaviour strange. Then, you will try to organize or make sense of what is happening. Once you have organized it in your brain, you must interpret the behaviour.

Interpreting

Although selecting and organizing incoming stimuli happens quickly and sometimes without conscious thought, interpretation can be a more deliberate and conscious step in perception (Vannuscorps & Caramazza, 2016). **Interpretation** is the third part of the perception process, in which we assign meaning to our experiences using mental structures known as schemata. Schemata are like databases of stored, related information that we use to interpret new experiences. We all have relatively complicated schemata developed over time as small information units combine to make more complex information. So, you must interpret the situation after you select information and organize things in your brain. As discussed in the example above, your friend waves their hands wildly (attending), and you are trying to figure out what they are communicating to you (organizing). You will attach meaning (interpreting). Does your friend need help and is trying to get your attention, or does your friend want you to watch out for something behind you?

We have an overall schema about interpreting experiences with teachers and classmates. Based on what parents, peers, and the media told us about the school, this schema developed before we went to preschool. For example, you learned that certain symbols and objects like an apple, a ruler, a calculator, and a notebook are associated with being a student or teacher. You learned new concepts such as grades and recess and engaged in new practices such as doing homework, studying, and taking tests. You also formed new relationships with teachers, administrators, and classmates. Your schema is adapted to the changing

environment as you progress through your education. Whether schema reevaluation and revision is smooth or troubling varies from situation to situation and person to person. For example, when faced with new expectations for behaviour and academic engagement, some students adapt their schema relatively quickly as they move from elementary to junior high to high school and college. Other students adapt slowly, and holding onto their old schema creates problems as they try to interpret new information through old, incompatible schema.

It is essential to be aware of schemata because our interpretations affect our behaviour (Rumelhart, 2017). For example, suppose you are doing a group project for class and think a group member is shy based on your schema of how shy people communicate. In that case, you may refrain from giving them presentation responsibilities in your group project because you do not think shy people make good public speakers. Schemata also guide our interactions, providing a script for our behaviours. We know, in general, how to act and communicate in a waiting room, in a classroom, or on a first date. Scholars have identified some factors that influence our interpretations:

Personal Experience

First, personal experience impacts our interpretation of events. What prior experiences have you had that affect your perceptions? Maybe you heard from your friends that a particular restaurant was excellent, but when you went there, you had a horrible experience and decided never to return. Even though your friends might try to persuade you to try it again, you might be inclined not to go because your experience with that restaurant was not good.

Involvement

Second, the degree of involvement impacts your interpretation. The more involved or deeper your relationship is with another person, the more likely you will interpret their behaviours differently than someone you do not know well. For instance, let's pretend you are a manager, and two of your employees come to work late. One

worker is your best friend, and the other is someone who just started, and you do not know well. You are more likely to interpret your best friend's behaviour more altruistically than the other worker because you have known your best friend for longer. Besides, since this person is your best friend, this implies that you interact and are more involved with them compared to other friends.

Expectations

Third, our expectations can impact our sense of other people's behaviours. For instance, you might expect this to be true if you overheard some friends talking about a mean professor and how hostile they are in class. Let's say you meet the professor and attend their class; you might still have certain expectations about them based on what you heard. Even those expectations might be completely false, and you might still expect those allegations to be true.

Assumptions

Fourth, there are assumptions about human behaviour. Imagine you are a personal fitness trainer. Do you believe that people like to exercise or need to exercise? Your answer to that question might be based on your assumptions. If you are a person who is inclined to exercise, then you might think that all people like to work out. However, if you do not want to exercise but know that people should be physically fit, you would more likely agree with the statement that people need to exercise. Your assumptions about humans can shape the way that you interpret their behaviour. Another example might be that if you believe that most people would donate to a worthy cause, you might be shocked to learn that not everyone thinks this way. When we assume that all humans should act a certain way, we are more likely to interpret their behaviour differently if they do not respond in a certain way.

Relational Satisfaction

Fifth, relational satisfaction will make you see things very differently. Relational

satisfaction is how satisfied or happy you are with your current relationship(s). If you are content, you are more likely to view all behaviours as thoughtful and kind. However, if you are unsatisfied with your relationship(s), you are more likely to view their behaviour as distrustful or insincere.

Past Experiences

If you have had a good experience with a certain company, everything they do is terrific. However, if your first experience was horrible, you may think they are always horrible. In turn, you will interpret that company's actions as justified because you have already encountered a horrible experience.

Knowledge of Others

If you know someone close to you has a health problem, it will not be a shock if they need medical attention. However, it would be a complete surprise if you did not know this person was unhealthy. How you interpret a situation is often based on what you know about certain situations (Adler et al., 2013).

Watch the following video to understand better how the brain constructs your perception.

Watch: Perceiving is Believing



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=60#oembed-1

Video Transcript (see Appendix B 2.2)

Key Takeaways

- Perception is the process of attending to, organizing, and interpreting information. This process affects our communication because we respond to stimuli differently (whether they are objects or persons) based on how we perceive them.
- Given the massive amounts of stimuli taken in by our senses, we select only a portion of incoming information to organize and interpret. We select information based on salience. We tend to find visually or aurally stimulating salient things and things that meet our needs and interests. Expectations also influence what information we select.
- We then organize the selected information using proximity, similarity, and patterns.
- We interpret information using schemata, allowing us to assign meaning based on accumulated knowledge and previous experience.

Exercises

1. Take a moment to look around wherever you are right now. Take in the perceptual field around you. What is salient for you at this moment and why?
2. We simplify and categorize information into patterns as we organize information (sensory information, objects, and people). Identify some cases in which this aspect of the perception process is beneficial. Identify some cases in which it could be harmful.
3. Think about some of the schemata you have that help you make sense of the world around you. For each of the following contexts — academic, professional, and personal — identify a schema you commonly rely on or think you will rely on. For each schema you identified, note a few ways that it has already been challenged or may be challenged in the future.

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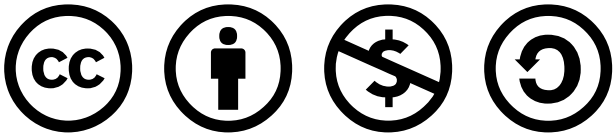
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2.3 Perceiving Others

Learning Objectives

- Differentiate between internal and external attributions.
- Explain two common perceptual errors: the fundamental attribution error and self-serving bias.
- Discuss how the primacy and recency effects relate to first and last impressions.
- Describe the influences on perception.

Are you a good judge of character? How quickly can you "size someone up?" Interestingly, research shows that many people are surprisingly accurate at predicting how an interaction with someone will unfold based on initial impressions. As you read this section, remember that these principles apply to how you perceive others and how others perceive you. Just as others make impressions on us, we make impressions on others. We have already learned how the perception process works in selecting, organizing, and interpreting. In this section, we will focus on how we perceive others, specifically how we interpret our perceptions of others.

Attribution and Interpretation

You likely have a family member, friend, classmate, or coworker with ideological or political differences. When conversations and inevitable disagreements occur, you may view this person as "pushing your buttons" if you are invested in the issue being debated, or you may view the person as "on their soapbox" if you are not invested. In either case, your existing perceptions of the other person are probably reinforced after your conversation. You may leave the conversation thinking, "They will never wake up and see how ignorant they are! I do not know why I even bother talking to them!" Similar situations occur regularly; some critical psychological processes influence how we perceive others' behaviours. By examining these processes,

attribution, in particular, we can see how our communication with others is affected by the explanations we create for others' behaviour. In addition, we will learn some common errors we make in the attribution process that regularly lead to conflict and misunderstanding.

Fundamental Attribution Error

In most interactions, we are constantly running an attribution script in our minds, which essentially tries to come up with explanations for what is happening (Crittenden, 1983). Why did my neighbour slam the door when she saw me walking down the hall? Why is my partner being extra nice to me today? Why did my officemate miss our project team meeting this morning? We generally seek to attribute the cause of others' behaviours to internal or external factors. **Internal attributions** connect the cause of behaviours to personal aspects such as personality traits. **External attributions** connect the cause of behaviours to situational factors. Attributions are essential because our reactions to others' behaviours are strongly influenced by the explanations we reach (Crittenden, 1983). Imagine that Jen and Luke are colleagues. One day, Luke gets frustrated and raises his voice to Jen. She may find that behaviour offensive and even consider reporting him if she attributes the cause of the blow-up to his personality since personality traits are usually relatively stable and difficult to control or change.



Figure 2.3.1. Frustrated drivers often use internal attributions to explain other drivers' behaviours.

Conversely, Jen may be more forgiving if she attributes the cause of his behaviour to situational factors beyond Luke's control since external factors are usually temporary. If she makes an internal attribution, Jen may think, "Wow, this person is a loose cannon. Who knows when he will lose it again?" If she makes an external attribution, she may think, "Luke has been under a lot of pressure to meet deadlines at work and has not been getting much sleep. Once this project is over, I am sure he will be more relaxed." This process of attribution is ongoing, and, as with many aspects of perception, we are sometimes aware of the attributions we make, and sometimes they are automatic or unconscious. Attribution has received much scholarly attention because some of the most common perceptual errors or biases occur in this part of the perception process.

Perceptual errors can also be biased, and in the case of the self-serving bias, the error works in our favour. Just as we tend to attribute others' behaviours to internal rather than external causes, we do the same for ourselves, mainly when our behaviours have led to something successful or positive (Sillars, 1980). When our behaviours lead to failure or something negative, we attribute the cause to external factors. Thus the **self-serving bias** is a perceptual error through which we attribute the cause of our successes to internal personal factors while attributing our failures to external factors beyond our control. When we look at the fundamental attribution error and the self-serving bias together, we can see that we are likely to judge ourselves more favourably than another person, or at least less personally.

The professor–student relationship is an excellent example of how these concepts can play out. We have often heard students who earned an unsatisfactory grade on an assignment attribute that grade to their professor's strictness, unfairness, or incompetence. Professors may also attribute a poor grade to the student's laziness, attitude, or intelligence. In both cases, the behaviour is explained using an internal attribution and is an example of the fundamental attribution error (Shepperd et al., 2008). Students may attribute their poor grades to their busy schedules or other external situational factors rather than their lack of motivation, interest, or preparation (internal attributions).

On the other hand, when students get a good grade on a paper, they will likely attribute that cause to their intelligence or hard work rather than an easy assignment or an "easy grading" professor. Both of these examples illustrate the self-serving bias. These psychological processes have implications for our

communication because when we attribute causality to another person's personality, we tend to have a stronger emotional reaction and assume that this personality characteristic is stable, which may lead us to avoid communication with the person or to react negatively.

Now that you know these common errors, you can monitor them more and check perceptions, which we will learn more about later, to verify your attributions.

Impressions and Interpretation

As we perceive others, we make impressions about their personality, likeability, attractiveness, and other characteristics. Although many impressions are personal, what forms them is sometimes based more on circumstances than individual characteristics. The information we take in is not all treated equally. How important are first impressions? Does the last thing you notice about a person stick with you longer because it is more recent? Do we tend to remember the positive or negative things we notice about a person? This section will help answer these questions as we explore how the timing of information and the content of the messages we receive can influence our perception.

First and Last Impressions

The old saying, "You never get a second chance to make a good impression," points to the fact that first impressions matter. The brain is a predictive organ in that it wants to know, based on previous experiences and patterns, what to expect next. First impressions fill this need, allowing us to determine how to proceed with an interaction after only a quick assessment of the person we are interacting with (Hargie, 2011). People are surprisingly good at making accurate first impressions about how an interaction will unfold and identifying personality characteristics of people they do not know. Furthermore, based on initial interaction, people can generally predict how another person will behave toward them. People's accuracy and ability to predict interaction based on first impressions vary, but people with high accuracy are typically socially skilled and popular and have less loneliness, anxiety, and depression; more satisfying relationships; and more senior positions

and higher salaries (Hargie, 2011). So not only do first impressions matter, but having the ability to form accurate first impressions seems to correlate to many other positive characteristics.

First impressions are enduring because of the **primacy effect**, which leads us to place more value on the first information we receive about a person. So if we interpret the first information we receive from or about a person as positive, then a positive first impression will form and influence how we respond to that person as the interaction continues. Likewise, negative interpretations of information can lead us to form negative first impressions. If you sit down at a clinic and staff walk by for several minutes and no one greets you, you will likely interpret that negatively and not have a good impression of health care providers when they finally show up. This may lead you to be short with the staff, which may lead them not to be as attentive as usual. At this point, a series of negative interactions have set a cycle that will be difficult to reverse and make cheerful.

The **recency effect** puts more weight on the most recent impression of a person's communication over earlier impressions. A negative final impression can tarnish even a positive first impression. Imagine that a professor has maintained relatively high credibility with you over the semester. They made an excellent first impression by being organized, approachable, and interesting during the first days of class. The rest of the semester went reasonably well, with no significant conflicts. However, during the last week of the term, they did not have the final papers graded and ready to turn back by the time they said they would, which left you with some uncertainty about how well you needed to do on the final exam to earn an A in the class. When you did get your paper back, on the last day of class, you saw that your grade was much lower than you expected. What would you write on the instructor evaluation if this happened to you? Because of the recency effect, many students would likely give a disproportionate amount of value to the professor's actions in the final week of the semester, negatively skewing the evaluation, which is supposed to be reflective of the entire semester. Even though the professor only returned one assignment late, that fact is very recent in students' minds and can overshadow the positive impression that formed many weeks earlier.

Influences on Perception

Physiological Influences

Some of the reasons why we do not interpret things in the same way, are due to physiology. Hence, biology impacts what we do and do not perceive. In this section, we will discuss various physiological influences.

- **Senses** — our senses can impact what and where we focus our attention. For instance, if you have a strong sense of smell, you might be more sensitive to a foul-smelling odour than someone who cannot smell anything due to sinus problems. Our senses give us a different perception of the world.
- **Age** — age can impact what we perceive. Have you ever noticed children have so much energy and the elderly do not? Children may perceive there is much to do daily, and the elderly may perceive nothing to do. Our age influences how we think about things.
- **Health** — when we are healthy, we have the stamina and endurance to do many things. However, our bodies may be more inclined to rest when we are sick. Thus, we will perceive a lot of information differently. For instance, some of your favourite meals will taste good when you are healthy, but when you are sick, they might not taste so good because you cannot smell things due to a stuffy nose.
- **Hunger** — when you are hungry, it is tough to concentrate on anything except food. Studies have shown that when people are hungry, they only focus on something to eat.
- **Biological cycles** — some people are "morning larks," and some are "night owls." In other words, there are peaks where people perform at their highest level. For some individuals, it is late at night, and for others, it is early in the morning. People who perform at their peak times are likely to be more perceptive of information. If you are a person who loves getting up early, you would probably hate night classes because you are not able to absorb as much information as you could if the class was in the morning.

Psychological Influences

Sometimes influences on perception are not physiological but psychological. These influences include mood and self-concept. These influences are based on our minds, and we cannot detect them in others.

- **Mood** — whether happy or sad, can affect how we view the world. For instance, we might view anything that happens more positively if we are happy.
- **Self-concept** — if we have a healthy self-concept, we may not be offended if someone makes a negative remark. Still, if we have a poor self-concept, we will probably be more influenced by negative remarks. The stronger our self-concept is, the more likely it will affect how we perceive other people's communication behaviours toward us.

Social Influences

Social influences include sex and gender roles, as well as occupational roles. These roles can impact our perceptions. Because we are in these roles, we might likely think differently than others in different roles.

- **Sex and gender roles** — our culture has certain expectations regarding how men and women should behave in public. Women are expected to be more nurturing than men. Moreover, men and women are viewed differently concerning the marital status and age.
- **Occupational roles** — our jobs influence how we perceive the world. If you were a lawyer, you might be more inclined to take action on civil cases than the average public member because you know how to handle these situations. Moreover, if you work in a health environment, you are more likely to perceive the health of other individuals. You would be able to tell if someone needed urgent medical care or not.
- Another social influence on perception is the **standpoint theory** (Harding, 2004). This theory states that your perspective is influenced by where you stand. In other words, your experience colours your perspective. If, for example, you were raised in an upper-class family, you might not understand the challenges many working-class families face. This can lead to

misinterpretations if you base your interpretation on your perspective without considering others' perspectives.

Physical and Environmental Characteristics

We make first impressions based on various factors, including physical and environmental characteristics. Regarding physical characteristics, dress and grooming are essential, especially in professional contexts. We have a general schema regarding how to dress and groom for various situations ranging from formal to business casual to casual to lounging around the house.

Think about the harm done when people posing as social workers or healthcare providers commit crimes or other acts of malice. Seeing someone in a white lab coat automatically leads us to see that person as an authority figure. We fall into a scripted pattern of deferring to the "health care provider" and not asking too many questions. The Milgram experiments offer a startling example of how powerful these influences are. In the experiments, participants followed instructions from a man in a white lab coat (actually an actor), who prompted them to deliver electric shocks to a person in another room whenever the other person answered a memory question incorrectly. The experiment was about how people defer to authority figures instead of acting independently. Although no one was being shocked in the other room, many participants continued to "shock" (at very high levels of voltage) the other person even after the person supposedly being shocked complained of chest pains and became unresponsive (Encina, 2003).

Personality

Potential employers often conduct "employment verifications," during which they ask general questions about the applicant. While they may ask a few questions about intellectual ability or academic performance, they typically ask questions that try to create a personality profile of the applicant. They want to know what kind of leader, coworker, and person they are. This is a smart move on their part because

our personalities greatly influence how we see ourselves in the world and how we perceive and interact with others.

Personality is a person's general way of thinking, feeling, and behaving based on underlying motivations and impulses (McCornack, 2007). These underlying motivations and impulses form our personality traits. Personality traits are "underlying," but they are pretty enduring once a person reaches adulthood. That is not to say that people's personalities do not change, but significant personality changes are not expected unless they result from trauma. Although personality scholars believe there are thousands of personalities, they all comprise some combination of the same few traits. Much research has been done on personality traits, and the "Big Five" most commonly discussed are extraversion, agreeableness, conscientiousness, neuroticism, and openness (McCrea, 2001, p. 825). These five traits appear to be representative of personalities across cultures.

- **Extraversion.** This refers to a person's interest in interacting with others. People with high extroversion are sociable and often called "extroverts." People with low extroversion, often called "introverts," are less sociable.
- **Agreeableness.** This refers to a person's level of trustworthiness and friendliness. People with high agreeableness are cooperative and likable. People with low agreeableness are suspicious of others and sometimes aggressive. This makes it more difficult for people to find them pleasant to be with.
- **Conscientiousness.** This refers to a person's level of self-organization and motivation. People with high conscientiousness are methodical, motivated, and dependable. People with low conscientiousness are less focused, careful, and dependable.
- **Neuroticism.** This refers to a person's level of negative thoughts regarding himself or herself. People high in neuroticism are insecure, experience emotional distress, and may be perceived as unstable. People low in neuroticism are more relaxed, have fewer emotional swings, and are perceived as more stable.
- **Openness.** This refers to a person's willingness to consider new ideas and perspectives. People high in openness are creative and are perceived as open-minded. People low in openness are more rigid, set in their thinking, and are perceived as "set in their ways."

The Halo and Horn Effects

We tend to adapt information that conflicts with our earlier impressions to fit the established frame. This is known as selective distortion and manifests in the "halo and horn" effects. The angelic halo and devilish horn are helpful metaphors for the lasting effects of positive and negative impressions.

The **halo effect** occurs when initial positive perceptions lead us to view later interactions as positive. The **horn effect** occurs when initial negative perceptions lead us to view later interactions as negative (Hargie, 2011).
Watch the following video and compare and contrast the halo and horn effects.

Watch: The Halo Effect

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=67#oembed-1

Video Transcript (see Appendix B 2.3.1)

Watch: Horn Effect

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=67#oembed-2

Video Transcript (see Appendix B 2.3.2)

Culture and Perception

Our cultural identities and our personalities affect our perceptions. Sometimes we are conscious of these effects, and sometimes we are not. In either case, we tend to favour others who exhibit cultural or personality traits that match our own. This tendency is so strong that it often leads us to assume that people we like are more similar to us than they are. Knowing more about how these forces influence our perceptions can help us become more aware of and competent about the impressions we form of others.

Culture

Race, gender, sexual orientation, class, ability, nationality, and age affect our perceptions. Our cultural identities influence the schemata through which we interpret our perceptions (Schwartz, 2020). As we are socialized into various cultural identities, we internalize beliefs, attitudes, and values shared by others in our cultural group. Schemata held by members of a cultural identity group have similarities, but schemata held by different cultural groups may vary significantly. Unless we are exposed to various cultural groups and learn how others perceive us and the world around them, we will likely have a narrow or naïve view of the world and assume that others see things the way we do. Exposing yourself to and experiencing cultural differences in perspective does not mean that you have to change your schema to match that of another cultural group. Instead, it may offer you a chance to understand better why and how your schemata were constructed the way they were.

You no doubt frequently hear people talking and writing about the “vast differences” between men and women. Whether it is communication, athletic ability, expressing emotions, or perception, people will say that women are one way and men are the other. While it is true that gender affects our perception, the reason for this difference stems more from social norms than genetic, physical, or psychological differences between men and women. We are socialized to perceive differences between men and women, leading us to exaggerate and amplify the existing differences (Halpern, 2000). We see the stereotypes and differences we are told to see, which helps to create a reality in which gender differences are “obvious.”

However, in multiple aspects of communication, men and women communicate much more similarly than differently (Halpern, 2000).

As we have learned, perception starts with information that comes through our senses (Macpherson, 2011). Our culture influences how we perceive even basic sensory information. The following list illustrates this:

- **Sight.** People in different cultures "read" art differently, differing in where they start to look at an image and the types of information they perceive and process.
- **Sound.** Music is perceived as both pleasant and unpleasent.
- **Touch.** In some cultures, it would be very offensive for a man to touch — even tap on the shoulder — a woman who is not a relative.
- **Taste.** Tastes for foods vary significantly around the world. "Stinky tofu," a favourite snack of people in Taipei, Taiwan's famous night market, would likely be very off-putting in terms of taste and smell to many foreign tourists.
- **Smell.** While Canadians spend considerable effort to mask natural body odour (which we typically find unpleasant) with soaps, sprays, and lotions, some other cultures would not find it unpleasant or even notice what we consider "b.o." Those same cultures may find a Canadian's "clean" (soapy, perfumed, deodorized) smell unpleasant.

In summary, various cultural factors shape how we perceive others because the beliefs, attitudes, and values of the cultural groups we belong are incorporated into our schema.

Key Takeaways

- We use attributions to interpret perceptual information: people's behaviour. Internal attributions connect behaviour to internal characteristics such as personality traits. External attributions connect behaviour to external characteristics such as situational factors.
- Two common perceptual errors in the attribution process are the fundamental attribution error and the self-serving bias.

    - The fundamental attribution error refers to our tendency to overattribute other people's behaviours to internal rather than external causes.
    - The self-serving bias refers to our tendency to overattribute our successes to internal factors and overattribute our failures to external factors.

- First and last impressions are powerful forces in the perception process. The primacy effect is a perceptual tendency to place more importance on initial impressions than on later impressions. The recency effect is the perceptual tendency to emphasize the most recent impressions over earlier ones.
- Physical and environmental cues such as clothing, grooming, attractiveness, and material objects influence our impressions of people.
- The halo effect describes a perceptual effect that occurs when initial positive impressions lead us to view later interactions as positive. The horn effect describes a perceptual effect that occurs when initial negative impressions lead us to view later interactions as unfavourable.
- Even though widespread knowledge claims that women and men communicate very differently, communication processes for each gender are more similar than different.

Exercises

1. When you watch a film with friends, talk about it afterward and listen to how each person perceived aspects of the film. Ask them each to describe it in 10 words or less. Did they use the exact words? Did you see it the same way or differently? Did you catch all the points, frames of reference, and values, or did you miss any information? What does this say about perception?

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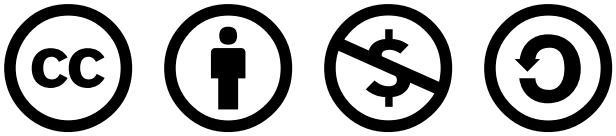
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2.4 Improving Perception

Learning Objectives

- Discuss strategies for improving self-perception.
- Discuss strategies for improving the perception of others.
- Explain perception checking to improve the perception of self and others.

So far, we have learned about the perception process and how we perceive others and ourselves. Now we will turn to a discussion of how to improve our perception. Our self-perception can be enhanced by becoming aware of how schema, socializing forces, self-fulfilling prophecies, and harmful thinking patterns can distort our ability to describe and evaluate ourselves. How we perceive others can be improved by developing better listening and empathetic skills, becoming aware of stereotypes and prejudice, enhancing emotional intelligence by developing self-awareness through self-reflection, and engaging in perception checking.

Improving Self-Perception

Our self-perceptions can and do change. Recall that we have overall self-concept and self-esteem that are relatively stable, and we also have context-specific self-perceptions. Context-specific self-perceptions vary depending on the person we interact with, our emotional state, and the subject matter being discussed.

Becoming aware of the process of self-perception and the various components of our self-concept will help you understand and improve your self-perceptions.

Since self-concept and self-esteem are so subjective and personal, it would be inaccurate to say that someone's self-concept is "right" or "wrong." Instead, we can identify negative and positive self-perceptions and discuss common barriers to forming accurate and positive self-perceptions. We can also identify common patterns people experience that interfere with their ability to monitor, understand, and change their self-perceptions. Changing your overall self-concept or self-esteem is not easy, given that these reflections on who we are and how we judge ourselves are constructed over many interactions. A variety of life-changing events can quite quickly alter our self-perceptions. Think of how your self-view changed from high school to a post-secondary educational institution. Similarly, other people's self-perceptions likely change when they enter a committed relationship, have a child, move geographically, or start a new job.



Figure 2.4.1. Having a child can lead to a significant change in a person's self-concept.

Aside from experiencing life-changing events, we can make slower changes to our self-perceptions with concerted efforts to become more competent communicators through emotional intelligence (self-monitoring and reflection). As you actively try to change your self-perceptions, do not be surprised if you encounter some resistance from significant others. When you change or improve

your self-concept, your communication will also change, which may prompt other people to respond to you differently. Although you may have good reasons for changing certain aspects of your self-perception, others may become unsettled or confused by your changing behaviours and communication. Remember, people try to increase predictability and decrease uncertainty within personal relationships. For example, many students begin to take their post-secondary education more seriously during the final years of their program. As these students begin to change their self-concept to include the role of "serious student preparing to graduate and enter the professional world," they likely have friends who want to maintain the "semi-serious student who does not exert much consistent effort and prefers partying to studying" role that used to be a shared characteristic of both students' self-concepts. As the first student's behaviour changes to accommodate this new aspect of their self-concept, it may upset the friend used to weeknights spent hanging out rather than studying. Let us now discuss some suggestions to help avoid common barriers to accurate and positive self-perceptions and patterns of behaviour that perpetuate negative self-perception cycles.

Be Critical of Socializing Forces

We learned earlier that family, friends, sociocultural norms, and the media are some socializing forces that influence our thinking and, therefore, our self-perception. These powerful forces serve positive functions but can also set negative self-perception patterns into motion.

We have already discussed how the media presents us with narrow and often unrealistic beauty standards. Even though most of us know that these standards do not represent what is normal or natural for the human body, we internalize these ideals, which results in various problems ranging from eating disorders to depression to poor self-esteem.



Figure 2.4.2. The "Healthy at Every Size" movement strives to teach people that being thin does not necessarily mean a person is healthy.

Cultural influences related to identities and differences can also lead to distorted self-perceptions, especially for people who occupy marginalized or oppressed identities. While perception research has often been used to support the notion that individuals who are subjected to discrimination, such as members of racial and ethnic minority groups, are likely to have low self-esteem because they internalize negative societal views, this is not always the case (Armenta & Hunt, 2009; Mereish et al., 2016). Some minorities do not just passively accept the negative views society places on them. Instead, they try to maintain favourable self-perceptions in the face of discriminatory attitudes. People in groups that are the targets of discrimination may identify with their in-group more because of this threat, which may help them maintain psychological well-being. In short, they reject the negative evaluations of the out-group and find refuge and support in their identification with others who share their marginalized status.

Be Aware of Self-Fulfilling Prophecies

Self-fulfilling prophecies are thought and action patterns in which a person's false belief triggers a behaviour that makes the initial false belief actually or seemingly come true (Guyll et al., 2010). Suppose that you are treated incredibly encouragingly in one of your classes. Imagine that you have an instructor who continually "catches you doing something right" and praises you for your efforts and achievements.

Would you likely do well in this class and perhaps take more advanced courses in this subject?

In a psychology experiment that has become famous through repeated trials, several public school teachers were told that specific students were expected to do quite well because of their intelligence (Rosenthal & Jacobson, 1968). These students were identified as having *unique* potential that had not yet "bloomed." The teachers did not know these "special potential" students were randomly selected. That's right — they had no more special potential than other students.

Can you anticipate the outcome? As you may guess, the students lived up to their teachers' level of expectation. Even though the teachers were supposed to give appropriate attention and encouragement to all students, they unconsciously communicated special encouragement verbally and nonverbally to the "special" potential students. And these students, who were no more gifted than their peers, showed significant improvement by the end of the school year.

In more recent studies, researchers have observed that the opposite effect can also happen; when students are seen as lacking potential, teachers tend to discourage them or, at a minimum, fail to give them adequate encouragement. As a result, the students do poorly (Schugurensky, 2009).

When people encourage you, it affects how you see yourself and your potential. Seek encouragement for your writing and speaking. Actively choose positive reinforcement as you develop your communication skills. You will make mistakes, but it is essential to learn from them. Remember that criticism should be constructive, with specific points you can address, correct, and improve.

The concept of a self-fulfilling prophecy, in which someone's behaviour matches and mirrors others' expectations, is not new. While studying this interaction between expectations and performance, Rosenthal, a professor of social psychology at Harvard, observed four principles (Rosnow & Rosenthal, 1999):

1. We form certain expectations of people or events.
2. We communicate those expectations with various cues, verbal and nonverbal.
3. People respond to these cues by adjusting their behaviour to match expectations.
4. The outcome is that the original expectation becomes true.

Experimental research shows that self-affirmation techniques can successfully intervene in such self-fulfilling prophecies. Thinking positive thoughts and focusing on personality strengths can stop this negative cycle of thinking. It has also been shown to positively affect academic performance, weight loss, and interpersonal relationships (Stinson et al., 2011).

Create and Maintain Supportive Interpersonal Relationships

Aside from giving yourself affirming messages to help with self-perception, it is essential to find interpersonal support. Although most people have at least some supportive relationships, many also have people in their lives ranging from negative to toxic. It is difficult to break out of those cycles when you find yourself in negative relational cycles, whether with friends, family, or work colleagues. But we can all choose to be around people who will help us be who we want to be and not be around people who hinder our self-progress. This notion can also be taken to the extreme, however. It would not be wise to surround yourself with people who only validate you and do not constructively challenge you because this could lead to distorted self-perceptions.

Beware of Distorted Patterns of Thinking and Acting

You already know from our discussion of attribution errors that we all have perceptual biases that distort our thinking. Many of these are common, and we often engage in distorted thinking without consciousness. Learning about typical negative patterns of thinking and acting may help us acknowledge and intervene in them. One such pattern involves self-esteem and overcompensation.

People with low self-esteem may act in ways that overcompensate for their feelings of low self-worth and other insecurities. Whether it is the social worker buying a midlife crisis convertible, the community leader who wears several carats worth of diamonds, or the professor who wears the latest in fashion, people often turn to material possessions to boost self-esteem. While these purchases may make people feel better in the short term, they may have adverse financial effects that can exacerbate negative self-perceptions and lead to interpersonal conflict. People

also compensate for self-esteem with their relational choices. A person anxious about their career success may surround themselves with people they deem less successful than they are. In this case, being a big fish in a small pond helps some people feel better about themselves when they engage in social comparison.

People can also get into a negative thought and action cycle by setting unrealistic goals and consistently not meeting them. Like a self-fulfilling prophecy, people who set unrealistic goals can have negative feelings of self-efficacy, which, as we learned earlier, can negatively affect self-esteem and self-concept. The goals we set should be challenging but progressive, meaning we work to meet a realistic goal, then increase our expectations, set another goal, and so on.

Some people develop low self-esteem because they lack accurate information about themselves, which may be intentional or unintentional. A person can intentionally try to maintain high self-esteem by ignoring or downplaying negative comments and beliefs and focusing on positive evaluations. While this can be good, it can also lead to a distorted self-concept. There is a middle ground between beating yourself up or dwelling on the negative and ignoring potentially constructive feedback about weaknesses and missing opportunities to grow as a person. Conversely, people with low self-esteem or negative self-concepts may discount or ignore positive feedback.



Figure 2.4.3. Some contestants on American Idol find it difficult to accept constructive criticism from judges because they have distorted self-perceptions about their singing abilities.

Overcoming Barriers to Perceiving Others

Many barriers prevent us from perceiving others competently. While some are more difficult to overcome, they can all be addressed by raising awareness of the influences around us and committing to monitoring, reflecting on, and changing communication habits. Whether it is our listening skills, lack of empathy, or stereotypes and prejudice, various filters and blinders influence how we perceive and respond to others.

Develop Empathetic Listening Skills

Effective listening is complex, and most of us need to make a concerted effort to overcome common barriers to listening. Our fast-paced lives and cultural values that emphasize speaking over listening sometimes make listening a chore. But we should be aware of the power of listening to make someone else feel better and to open our perceptual field to new sources of information. Empathetic listening can also help us expand our self- and social awareness by learning from other people's experiences and taking on different perspectives. Compassionate listening is challenging because it requires cognitive and emotional investment beyond learning a skill set.

By using nonverbal and verbal cues such as nodding and saying, "I see," healthcare professionals can encourage patients to continue talking. Active or effective listening involves showing interest in what clients say, acknowledging that you're listening and understanding, and engaging with them throughout the conversation. Healthcare professionals can offer general leads such as "What happened next?" to guide the conversation or propel it forward.

Beware of Stereotypes and Prejudice

"She's an elitist," "He's arrogant," or "People from X country are so lazy." These statements reflect **stereotypes** or beliefs we develop about groups, which we then apply to individuals from that group. Stereotypes are schemata taken too far, as they reduce and ignore a person's individuality and diversity within a larger group

of people. Stereotypes can be based on cultural identities, physical appearance, behaviour, speech, beliefs, and values, among other things, and are often caused by a lack of information about the target person or group (Guyll et al., 2010). Stereotypes can be positive, negative, or neutral, but all run the risk of lowering the quality of our communication.

Stereotypes can also lead to double standards that point to more significant cultural and social inequalities. There are many more words to describe a sexually active female than a male, and the terms used for females are disproportionately negative, while those used for males are more positive. Since stereotypes are generally based on a lack of information, we must take it upon ourselves to gain exposure to new information and people, which will likely require us to get out of our comfort zones. When we meet people, we should base our impressions on describable behaviour rather than inferred or secondhand information. When stereotypes negatively influence our overall feelings and attitudes about a person or group, prejudiced thinking results.

One of the primary responsibilities of a healthcare professional, for example, is to ensure the environment is culturally safe for everyone. This creates a safe space for clients to interact with healthcare professionals without judgment or discrimination, where the patient is free to express their cultural beliefs, values, and identity. This responsibility belongs to the individual healthcare professional and the larger healthcare organization.

Prejudice is negative feelings or attitudes toward people based on their identity. Prejudice can have individual or widespread adverse effects. At the personal level, a hiring manager may not hire a young man with a physical disability (even though that would be illegal if it were the only reason), which negatively affects that one man. However, if pervasive cultural thinking that people with physical disabilities are also mentally deficient leads hiring managers nationwide to make similar decisions, then prejudice has become a social injustice. In another example, when the disease we know today as HIV/AIDS started killing large numbers of people in the early 1980s, the response by some health and government officials was influenced by prejudice. Since the disease primarily affected gay men, Haitian immigrants, and drug users, it was prejudged to be a disease that affected only “deviants”. It therefore did not receive the same level of attention it would have otherwise. It took many years, investment of money, and education campaigns to

help people realize that HIV and AIDS do not prejudge based on race or sexual orientation and can affect anyone.

Monitor Emotional Intelligence

Emotional intelligence (or emotional quotient or EQ) is the ability to understand, use, and manage your emotions positively to relieve stress, communicate effectively, empathize with others, overcome challenges and defuse conflict. Regarding happiness and success, emotional intelligence matters as much as intellectual ability. Emotional intelligence helps you build stronger relationships, succeed at school and work, and achieve your career and personal goals. It can also help you connect with your feelings, turn intention into action, and make informed decisions about what matters most.

Four attributes commonly define emotional intelligence:

- **Self-management/self-regulation:** You can control impulsive feelings and behaviours, manage your emotions in healthy ways, take the initiative, follow through on commitments, and adapt to changing circumstances.
- **Self-awareness:** You recognize your emotions and how they affect your thoughts and behaviour. You know your strengths and opportunities for growth and have self-confidence.
- **Social awareness**: You have empathy. You can understand other people's emotions, needs, and concerns, pick up on emotional cues, feel comfortable socially, and recognize the power dynamics in a group or organization.
- **Relationship management:** You can develop and maintain good relationships, communicate clearly, inspire and influence others, work well in a team, and manage conflict.

Why is Emotional Intelligence so Important?

As we know, the most intelligent people are sometimes the most successful or fulfilled in life. You probably know academically brilliant people who are socially inept and unsuccessful at work or in their relationships. There needs to be more

than intellectual ability or intelligence quotient (IQ) to succeed. Your IQ can help you get into college, but your EQ will help you find professional success. IQ and EQ exist in tandem and are most effective when they build off one another.

Emotional intelligence affects:

- **Your performance at school or work.** High emotional intelligence can help you navigate the social complexities of the workplace, lead and motivate others, and excel in your career. When gauging important job candidates, many companies now rate emotional intelligence as important as technical ability and employ EQ testing before hiring.
- **Your physical health.** If you cannot manage your emotions, you are probably not managing your stress. This can lead to serious health problems. Uncontrolled stress raises blood pressure, suppresses the immune system, increases the risk of heart attack and stroke, contributes to infertility, and speeds up aging (Jiménez-Picón, 2021). The first step to improving emotional intelligence is to learn how to manage stress.
- **Your mental health.** Uncontrolled emotions and stress can also impact your mental health, making you vulnerable to anxiety and depression. You may struggle to form strong relationships if you cannot understand, get comfortable with, or manage your emotions. This can leave you lonely and isolated and further exacerbate mental health problems.
- **Your relationships.** By understanding your emotions and how to control them, you can better express and understand how others feel. This allows you to communicate more effectively and forge stronger relationships at work and in your personal life.
- **Your social intelligence.** Being in tune with your emotions serves a social purpose, connecting you to others and the world around you. Social intelligence enables you to recognize friends from foes, measure another person's interest in you, reduce stress, balance your nervous system through social communication, and feel loved and happy.

Building Emotional Intelligence: Four Key Skills to Increasing Your EQ

The skills that encompass emotional intelligence can be learned at any time. However, it is important to remember that there is a difference between simply learning about EQ and applying that knowledge to your life. Just because you know you should do something does not mean you will — especially when you become overwhelmed by stress, which can override your best intentions. To permanently change behaviour in ways that stand up under pressure, you must learn how to overcome anxiety in the moment and your relationships to remain emotionally aware.

Activity: Check Your Understanding

Test your Emotional Intelligence

Engage in Self-Reflection

An excellent way to improve your perceptions and increase your communication competence, in general, is to engage in self-reflection. If a communication encounter does not go well and you want to know why, self-reflection will be much more helpful if you are aware of and can recount your thoughts and actions.

Self-reflection can also help us increase our cultural awareness. Our thought process regarding culture is often **"other-focused,"** meaning that the culture of the other person or group is what stands out in our perception. However, the adage "know thyself" is appropriate, as we become more aware of our culture by better understanding other cultures and perspectives. Developing cultural self-awareness often requires us to get out of our comfort zones. Listening to people different from us is a critical component of developing self-knowledge. This may be uncomfortable because our taken-for-granted or deeply held beliefs and values may become less confident when we see multiple perspectives.

We can also become more aware of how our self-concept influences how we

perceive others. We often hold other people to the standards we have for ourselves or assume that their self-concept should be consistent with ours. For example, suppose you consider yourself neat and think that sloppiness in your appearance would show that you are unmotivated, rude, and lazy. In that case, you will likely feel the same of a person you judge to have a sloppy appearance. So asking questions like "Is my impression based on how this person wants to be, or how I think this person should want to be?" can lead to enlightening moments of self-reflection. Asking questions in general about the perceptions you are making is an integral part of perception checking, which we will discuss next.

Reflection is a mental process of thinking, feeling, and learning by thinking about what happened in the past, how things might be different if we/they had made other choices, what is happening now, and what could happen in the future (Rolfe et al., 2020). The reflective practice focuses on doing, building, generating, and disseminating professional knowledge (Rolfe et al., 2020). This occurs when healthcare professionals pay critical attention to the practical values and theories which inform everyday actions by examining their practice reflectively and reflexively.

Reflective practice can be essential in practice-based professional learning settings where people learn from their professional experiences rather than solely from formal training and knowledge transfer. It may be the most important personal and professional development and improvement source. It is also a meaningful way to bring together theory and practice; through reflection, a person can see and label forms of thought and theory within the context of their work (McBrien, 2007). A person who reflects throughout their practice is not just looking back on past actions and events but is taking a conscious look at emotions, experiences, actions, and responses and using that information to add to their existing knowledge base and reach a higher level of understanding (Paterson & Chapman, 2013).

Checking Perception

Perception checking is a strategy to help us monitor our reactions to and perceptions about people and communications. We can use some internal and external strategies to engage in perception checking. In terms of internal strategies, review the various influences on the perception we have learned about in this

chapter and always be willing to ask yourself, “What is influencing the perceptions I am making right now?” Even being aware of the influences acting on our perceptions makes us more aware of what is happening in the perception process. Regarding external strategies, we can use other people to help verify our perceptions.

The cautionary adage “Things are not always as they appear” is applicable when evaluating your perceptions. Sometimes it is a good idea to bounce your thoughts off someone, especially if the perceptions relate to a high-stakes situation. For example, preventable crimes have been committed because people who saw something suspicious did not report it even though they had a bad feeling about it. But not all situations allow us the chance to verify our perceptions. Of course, we must walk a line between being reactionary and being too cautious, which is challenging to manage. We all know that we are ethically and sometimes legally required to report someone to the police who is harming themselves or others, but sometimes the circumstances are much more uncertain.

What can you do when you have a situation with a friend, coworker, family member, or another person in an interpersonal communication situation when you are uncertain about what is happening or want to double-check your interpretation before assuming that situation? A perception-checking statement is one helpful strategy you can use. It involves three steps, described below. Once you understand the basic principle behind the strategy, you can modify it to fit your personality and communication style better.

1. **Describe** the behaviour you observed.
2. **Offer** two or more possible interpretations of that behaviour.
3. **Seek** clarification about the interpretations.

The first step is the most important one because it is the step we often forget when confronting someone about a problem or concern we have. We tend to start with our interpretation so the listener is not sure where that interpretation is coming from. If you have ever had someone say to you, “Are you mad at me?” and you have no idea why they think that, it is because they forgot the first step of the perception checking statement. If they had said, “You have not called me in days. Are you mad at me?” then you would have known what prompted their question. So the first step is to describe what is happening or happened that prompted you

to bring your concerns to the listener. In the second step, rather than offering one definitive interpretation, you are using cognitive complexity to offer more than one interpretation. This serves a couple of functions. It lets the listener know that you're not sure of what's going on and are interested in hearing their perspective. It also helps you, as the speaker, stay open-minded and care for the other person.

The third step is simply passing the conversation to the other person. A request for clarification could be as simple as ending the perception-checking statement with, "What's up?" or "What's happening?"

Although the perception-checking statement is arguably an appropriate communication method, that does not mean you will be effective. If the other person is unwilling to speak to you or is not ready yet to talk about the situation, they may not respond in a way that promotes a conversation. But at least you have done your part by communicating your concerns clearly, specifically, and respectfully. If nothing else, you have hopefully opened the door for the conversation to continue later. Of course, that is assuming you have used it well. It is entirely possible to say you are using a perception-checking statement while being insincere. For example, if you said to someone, "You have not called me in a while. Are you avoiding me or just being rude? What's up?" it is unlikely you will get a very positive response since at least one of the interpretations offered is rather aggressive, more likely to provoke an argument than a conversation.

If you find the perception-checking statement a bit cumbersome or clunky, remember that you can modify it if you keep the important pieces. For example, instead of saying, "You have not called me in a while; I am wondering if you have been sick, busy with work, or annoyed with me. What's happening?" you could simply say, "We have not spoken in a while, is everything okay?" In the first version, all three steps of the perception-checking statement are included, but it is a bit long and awkward. In the second version, we still have the first step as we described the behaviour — a lack of communication. But rather than offering multiple interpretations and then requesting clarification, we combined the two into one overall possible interpretation — wondering if everything is okay, which also serves as a request to clarify.

Watch: Perception Checking

View this video about perception checking. Think about a time when you may have been in a similar situation. How did it make you feel? Could perception checking have helped? When could perception checking be utilized in a healthcare setting?

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=83#oembed-1

Video Transcript (see Appendix B 2.4)

Key Takeaways

- We can improve self-perception by avoiding reliance on rigid schemata, thinking critically about socializing institutions, intervening in self-fulfilling prophecies, finding supportive interpersonal networks, and becoming aware of cycles of thinking that distort our self-perception.
- We can improve our perceptions of others by developing empathetic listening skills, awareness of stereotypes and prejudice, and self-reflection.
- Perception checking is a strategy that allows us to monitor our perceptions of and reactions to other people and communications.

Exercises

1. Casey is a health studies student who has just arrived and is awaiting a briefing. The individual in charge enters the room, and Casey says good morning. The individual does not respond and walks out of the room. Since the individual did not respond or acknowledge Casey, Casey needs to make sense of this encounter — perception checking can help do that. First, Casey must try to describe (not evaluate) what happened. This can be done by asking, “What is going on?” In this

case, the individual left the room without responding or acknowledging Casey. Next, Casey needs to consider possible interpretations of what just happened. One interpretation might be that the individual does not like students. Another could be that the individual was in a hurry or distracted and did not hear Casey. In this perception step, being aware of your attributions is good. You might try to determine if you are overattributing internal or external causes. Lastly, you will want to verify and clarify. So Casey might ask a fellow student in the room if they know anything else that could cause the individual to be distracted. Or Casey might want to speak directly to the individual about the encounter. During this step, one must be aware of one's emotions. Even though Casey has already been thinking about the situation and may be experiencing some conflict, the individual may have no idea that their actions caused Casey to worry. If Casey were to approach the individual asking why they do not like her (which would not be a good idea because it is an assumption), the individual might become defensive, which could escalate the conflict. Casey could describe the behaviour objectively (without judging) and ask for clarification by saying, "When I said good morning earlier, I noticed you did not respond or acknowledge me. Is everything OK?"The steps of perception checking, as described in the previous scenario, are as follows:

- Step 1 — describe the behaviour or situation without evaluating or judging it.
- Step 2 — consider some possible interpretations of the behaviour, being aware of attributions and other influences on the perception process.
- Step 3 — verify what happened and ask for clarification from the other person's perspective. Be aware of perception since the other person likely experienced the event differently than you.

1. Give an example of how perception checking might be helpful to you in academic, professional, and personal contexts.
2. Which step of perception checking do you find the most challenging and why?

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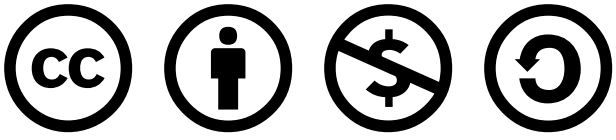
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CHAPTER 3: VERBAL COMMUNICATION

Have you ever said something that someone else misinterpreted? Some of the most common problems in interpersonal communication stem from the use of language. For instance, two students, Kelly and James, are texting each other. Kelly texts James about meeting for dinner, and James texts "K" instead of "okay." Kelly is worried because she thinks James is mad. She wonders why he texted "K" instead of "k," "ok," "yes" or "okay." James was in a hurry, and texted in caps because he was excited to see Kelly.

This example gives us an understanding of how language can influence our perceptions. Kelly and James had two different perceptions of the same event. One person was worried, and the other person was excited. This chapter examines verbal communication because we know that words are powerful. The words that we use can impact how other people perceive us and how to perceive others.

Language is a system of human communication using a particular form of spoken or written words, and other symbols or gestures for words. Language consists of the use of words in a structured way. Language helps us understand others' wants, needs, and desires. Language can help create connections, but it can also pull us apart. Language is vital to communication. Imagine if you never learned a language: how would you be able to function? Without language, how could you develop meaningful connections with others? Language allows us to express ourselves and obtain our goals.

Language is the most important element in human communication. Language is made up of words, which are arbitrary symbols. In this chapter, we will learn about how words work, the functions of language, and how to improve verbal communication.

In this chapter, we will learn about the relationship between language and meaning, how we come to know the content and rules of verbal communication, the functions of language, how to use words well, and the relationship between

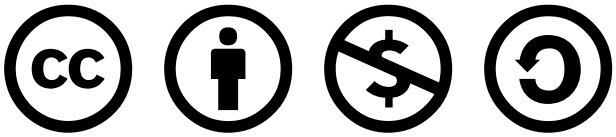
language and culture and conclude with some guidance on improving our verbal communication competence.

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3.1 How Words Work

Learning Objectives

- Explain how words have different rules (semantic, syntactic, and pragmatic).
- Describe the range of abstraction in language use from abstract to concrete.
- Explain the differences between the denotative and connotative meanings of language.

One person might call a shopping cart a buggy, and another might call it a cart. There are several ways to say you would like a beverage, such as “liquid refresher,” “soda,” “Coke,” “pop,” “refreshment,” or “drink.” A pacifier for a baby is sometimes called a “paci,” “binkie,” “sookie,” or “mute button.” Linguist Robin Lakoff asks, “How can something that is physically just puffs of air, a mere stand-in for reality, have the power to change us and our world?” (2001, p. 20). This question illustrates that meaning resides with people, and words do not necessarily or always represent the person’s meaning.

Words and Meaning

Words can have different rules to help us understand their meaning. There are three types of such rules: semantic, syntactic, and pragmatic (Gamble & Gamble, 2014).

Semantic Rules

Semantic rules are the “dictionary definition” of the word. However, meaning can change based on the context in which it is used. For instance, the word fly by itself does not mean anything. It makes more sense if we put the word into a context by saying things like, “There is a fly on the wall;” “I will fly to Dallas tomorrow;” or “The

fly on your pants is open!" We would not be able to communicate with others if we did not have semantic rules.

An example of this is a third-grade teacher who asked about a period. One student in her class went on and on about how girls have monthly periods but did not realize that the teacher meant using periods for punctuation at the end of a sentence. Hence, semantic rules need to be understood to avoid embarrassment or misunderstandings.

Syntactic Rules

Syntactic rules govern how we help guide the words we use. Syntactic rules refer to using grammar, structure, and punctuation to help effectively convey our ideas. For instance, we can say "Where are you?" instead of "Where you are," which conveys a different meaning and perception. The same thing can happen when you do not place a comma in the right place. Punctuation can make a big difference in how people understand a message.

A great example of syntactic rules is Yoda's *Star Wars* character, who often speaks with different rules. He has said, "Named must be your fear before banishing it you can" and "Happens to every guy sometimes this does." This example illustrates that syntactic rules can vary based on culture or background.

Pragmatic Rules

Pragmatic rules help us interpret messages by analyzing the interaction altogether. We will need to consider the words used, how they are stated, our relationship with the speaker, and our communication objectives. For instance, "I want to see you now" would mean different things if the speaker was your boss versus your friend. One could be a positive connotation, and another might be a negative one. The same holds for humour. Suppose we know the person we are speaking with understands and appreciates sarcasm. In that case, we might be more likely to engage in that behaviour and perceive it differently from someone who takes every word literally.

Most pragmatic rules are based on culture and experience. For instance, “Netflix and chill” often means two people will hook up. Imagine someone from a different country who did not know what this meant; they would be shocked if they thought they would watch Netflix with the other person and relax. Another example would be “Want to have a drink?” which usually infers an alcoholic beverage. Another way of saying this might be to say, “Would you like something to drink?” The second sentence does not imply that the drink has to contain alcohol.

It is common for people to text in capital letters when they are angry or excited. You would interpret the text differently if the text were not in capital letters. For instance, “I love you” might be perceived differently from “I LOVE YOU!!!” Thus, you should realize that pragmatic rules can impact the message when communicating with others.

Activity: Check Your Understanding



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https://openbooks.macewan.ca/professionalcommunication/?p=975#h5p-25

Words Create Reality

Language helps to create reality. Often, humans label their experiences. For instance, “success” has different interpretations depending on your perceptions. Success to you might mean owning a particular type of car or having a specific income. However, for someone else, success might be the freedom to do what they love or to travel to exotic places. “Success” might mean something completely different based on your background or culture.

Another example might be the word “intimacy.” Intimacy to one person might be similar to love, but to another person, it might be the psychological connection you feel with another person. Words can impact a person’s reality of what they believe and feel.

If a child complains that they do not feel loved, but their parents or guardians argue that they continuously show affection by giving hugs and doing fun shared activities, who would you believe? The child might say that they never heard their parent or guardian say the word love; hence, they do not feel love. So, when we argue that words can create a person's reality, that is what we mean. Specific words can make a difference in how a person will receive a message. That is why some rhetoricians and politicians will spend hours looking for the right word to capture the true essence of a message. A healthcare worker might be careful to use "overweight" instead of "fat" because it sounds drastically different. Words matter, and how they are used makes a difference.

Words Reflect Attitudes

When we first meet someone, we may use positive adjectives to describe that person. However, if you have a falling out you might use negative or neutral words to describe that same person. Words can reflect attitudes. Some people can label one experience as pleasant, and others can have the opposite experience. This difference is because words reflect our attitudes about things. If a person has positive emotions toward another, they might say that the person is funny, mature, and thrifty. However, if they have negative feelings or attitudes toward that person, they might describe them as childish, old, and cheap. These words can indicate how the person perceives them.

Level of Abstraction

When we think of language, it can be either concrete or abstract; this has the potential to affect how one comprehends the meaning of a message (Engleberg et al., 2015). **Concrete words** refer to tangible items — things you can count, touch, name, and identity in time. For example, phrases such as *ten thousand*, *concrete floor*, *John Smith*, and *ten o'clock on January 12* are concrete. In health care, concrete language is essential to ensure accurate information is obtained and shared (Videbeck, 2011). Concrete questions such as "When was your last bowel

movement?" or "When was the last time you took your blood pressure medication?" are clear for clients to answer and for healthcare providers to share accurate data.

In 1941, linguist S. I. Hayakawa created the abstraction ladder, which begins with **abstract concepts** at the top, while the bottom rung is very concrete. Figure 3. 1.1 illustrates this "ladder" and how you can move from abstract ideas or information through various levels of more concrete ideas to the most concrete idea (e.g., interpersonal communication). The topic becomes more fine-tuned and concrete as we move down the ladder.

In our daily lives, we use high levels of abstraction. For instance, growing up, your parents or guardians probably helped you with homework, cleaning, cooking, and transporting you from one event to another. Yet we do not typically thank them for each of these things — we might make a general comment such as a thank you rather than saying, "Thank you so much for helping me with my math homework and helping me figure out how to solve for the volume of spheres." It takes too long to say that, so people tend to be abstract. However, abstraction can cause problems if you do not provide enough description. In a healthcare environment, it is essential to ensure we use concrete language and check for understanding to avoid misunderstandings.



Figure 3.1.1. Ladder of Abstraction. Image Description (see Appendix A 3.1.1).

Activity: Check Your Understanding

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https://openbooks.macewan.ca/professionalcommunication/?p=975#h5p-26

Words and Meanings

Words can have denotative meanings or connotative meanings. Ogden and Richards (1923) proposed the triangle of meaning and noted that misunderstandings occur when people associate different meanings with the same message. Their model illustrates how linguistic symbols (such as words) relate to the objects they represent and that there is an indirect association between a word and the actual referent (the thing it represents). Figure 3.1.2 shows this example, in

which the word “dog” conjures up different meanings. The word “dog” is a symbol, signifier, sound element, or other linguistic symbol representing an underlying concept or meaning. When we hear the word “dog,” it is what we call the “signified,” or the meaning or idea expressed when someone hears the word. In this case, maybe you have a dog, and you see that dog as your best friend, or you visualize a Jack Russel Terrier or a dachshund. The meaning we attach to the symbol is separate from the physical entity. In this case, a real dog is a referent or the physical thing a word or phrase denotes or represents.

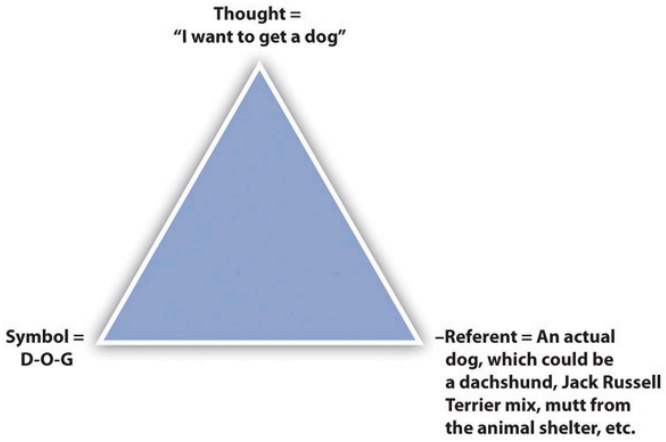


Figure 3.1.2. The triangle of meaning: symbol -thought – referent (real-world object)

Words can have a **denotative meaning**, which is the dictionary definition. These are words that most people are familiar with, and they can all agree on the understanding of the word. If you asked a person what a car or a phone is, they would most likely know what you are talking about when you use those words.

Words can have a **connotative meaning**, a subjective definition of the word. The word might mean something different from what you meant. For example, you may hear someone referring to their baby. You could safely assume that the person is referring to their infant, but they could just as easily be referring to a significant other or their pet.

Activity: Check Your Understanding

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Key Takeaways

- Sometimes confusion occurs because people are too abstract in their language. To be clear and concise in language, you must be as descriptive and specific as possible.
- The triangle of meaning is a model of communication that indicates the relationship between thought, symbol, and referent and highlights the indirect relationship between the symbol and the referent. The model explains how for any given symbol, there can be many different referents, which can lead to misunderstanding.
- *Denotation* refers to the agreed or dictionary definition of a word. *Connotation* refers to definitions based on emotion- or experience-based associations people have with a word.

Exercises

1. Apply the triangle of meaning to a recent message exchange within a personal and professional context in which differing referents led to misunderstanding. What could you have done to help prevent or correct the misunderstanding?
2. Think of some words that have strong connotations for you. How does your connotation differ from the denotation? How might your connotation differ from another person's?

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Image Attributions

Figure 3.1.1. Hayakawa, S. I. (1941, p. 85) in *Communication in the real world.*

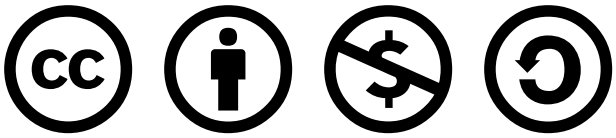
Figure 2.1.2. Ogden & RIchards (1923) in *Communication in the real world*.

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3.2 The Impact of Language

Learning Objectives

- Explain how naming and identity can influence perceptions.
- Describe how language can impact affiliation with others through convergence or divergence.
- Describe bias and how it may be expressed in sexist and racist language.

You can see that language influences how we make sense of the world. This section will teach how language can impact our perceptions and behaviour. To be effective communicators, we must understand how language can be significant and instrumental.

Naming and Identity

New parents or guardians typically spend a great deal of time trying to pick the right name for their newborn. We know that names can impact other people's perceptions (Lieberson, 2000). Our names impact how we feel and how we behave. For instance, if you heard that someone was named Stacy, you might think that person was female, pleasant, and friendly, and you would be surprised if that person turned out to be male, mean, and aggressive.

People with unusual names tend to have more emotional distress than those with common names (Christenfeld & Larsen, 2008). Names impact our identity because others may typically have negative perceptions of unusual names or unique spellings of names. Names can change over time and can gain acceptance. For instance, Madison was not even considered a female first name until the movie *Splash* became popular in the 1980s (Weingarten, 2003).

Some names are very distinctive, which also makes them memorable and recognizable. Think about musical artists or celebrities with unique names. It helps you remember them and distinguish that person from others.

Some names encompass a cultural or ethnic identity. In *Freakonomics,* the authors showed a relationship between names and socioeconomic status (Levitt & Dubner, 2005). They discovered that a popular name usually starts with families with high socioeconomic status and then becomes popular with lower socioeconomic families. Hence, it is very conceivable to determine the socioeconomic status of people you associate with based on their birth date and name. Popular names for girls and boys, and how their ranking has changed over the years, are readily found on baby name websites and lists.

Affiliation

When we want others to associate with or be affiliated with us, we might change how we speak and our words. All of those things can impact how other people relate to us. That interest also increased when potential romantic partners employed the same word choices regarding pronouns and prepositions. At the same time, relationship duration for couples that used similar word choices when texting each other was significantly increased. This study implies that we often inadvertently mimic other people's use of language when we focus on what they say.

If you have been in a romantic relationship for an extended period, you might create special expressions, jargon, or nicknames for the other person. That specialized vocabulary can create greater closeness and understanding. The same type of thinking occurs for groups in a gang or persons in the military. If we adapt to the other person's communication style (converge), we also impact perceptions of affiliation. Research has shown that people with similar speech have more positive feelings for each other. However, speech can also work in the opposite direction when we diverge or communicate differently. For instance, an English-speaking group from another culture might speak a different dialect or language among themselves rather than English to create distance and privacy from others.

Biased Language

Before discussing the concepts of sexism and racism, we must understand the term "bias." **Bias** is an attitude that is not objective or balanced, is prejudiced, and includes the use of words that intentionally or unintentionally offend people or express an unfair attitude concerning a person's race, ethnicity, sexual orientation, age, disability, or illness.

Biased language shows preference in favour of or against a certain point of view, prejudice, or demeaning of others (Poteat & DiGiovanni, 2010). Biased language is uneven or unbalanced. Bias has a way of creeping into our daily language use, often needing more awareness. Culturally biased language can refer to one or more cultural identities, including race, gender, age, sexual orientation, and ability. Much biased language is based on stereotypes and myths, both cultural and individual, that influence the words we use. Bias is intentional and unintentional; sometimes, we do not even realize our words communicate a particular bias, and we do not intend to offend others. However, because others may decode a message differently from what we intend, as competent communicators, we must be aware of how others may interpret (or misinterpret) our words, the biases we may be intentionally or unintentionally communicating, and how our word choice can affect others. While it is unlikely that we will ever eliminate bias from our verbal communication, it is important to be aware and reflective of our communication. There are five types of biases inherent in a language people use: race, gender, age, sexual orientation, and ableness.

Race

People sometimes use euphemisms for race that illustrate bias because the terms are usually implicitly compared to the dominant group (American Psychological Association (APA), 2020). For example, referring to a person as "urban" or a neighbourhood as "inner city" can be an accurate descriptor. Still, when such words are used as a substitute for racial identity, they illustrate cultural biases that equate certain races with cities and poverty. Using adjectives such as articulate or well-dressed in statements like "My Black coworker is articulate" reinforces negative stereotypes even though these words are typically viewed as positive. Terms like

non-White set whiteness as the norm, implying that White people are the norm against which all other races should be compared.

Biased language also reduces the diversity within certain racial groups — for example, referring to anyone who looks of Asian descent as Chinese or everyone who "looks" Latino as Mexican. Some people with racial identities other than White, including people who are multiracial, use the label person or people of colour to indicate solidarity among groups. However, they will likely prefer a more specific label when referring to an individual or referencing a specific racial group.

Gender

Language tends to exaggerate perceived and stereotypical differences between men and women. For example, the term opposite sex presumes that men and women are opposites. Other words reflect the general masculine bias present in English. The following word pairs show the gender-biased term followed by an unbiased term: waitress/server, chairman/chair or chairperson, mankind/humankind, cameraman/camera operator, mailman/postal worker, sportsmanship/fair play. Common language practices also tend to infantilize women, not men, when, for example, women are referred to as chicks, girls, or babes. Since no linguistic equivalent indicates the marital status of men before their name, using Ms. instead of Miss or Mrs. helps reduce bias.

Age

The language that includes **age bias** can be directed toward older or younger people. Descriptions of more youthful people often presume recklessness or inexperience, while those of older people think frailty or disconnection. The term 'elderly' generally refers to people over 65. Still, it has connotations of weakness, which is inaccurate because many people over 65 are stronger and more athletic than people in their twenties and thirties. Even though it is a generic phrase, "older people" does not have negative implications, whereas referring to people over 18 as boys or girls is not typically considered appropriate.

Sexual Orientation

Discussions of sexual orientation range from everyday conversations to contentious political and personal debates. The negative stereotypes associated with homosexuality, including deviance, mental illness, and criminal behaviour, continue to influence our language use (APA, 2020). Terminology related to gay, lesbian, and bisexual people can be confusing, so let's raise awareness about preferred labels. First, sexual orientation is the term preferred to sexual preference. Preference suggests a voluntary choice, as in someone having a preference for cheddar or American cheese, which does not reflect the experience of most **2SLGBTQIA+ [two-spirit, lesbian, gay, bisexual, transgender, queer or questioning, intersex, and asexual]** people or research findings that show sexuality is more complex. Most people also prefer the labels lesbian, gay, transgender, queer or questioning, intersex, or asexual plus to homosexual, which is clinical and does not so much refer to an identity as a sex act. Language regarding romantic relationships contains bias when heterosexuality is assumed, for example, asking a female if she has a boyfriend or a male if he has a girlfriend. Comments comparing 2SLGBTQIA+ people to "normal" people, although possibly intended to be positive, reinforces the stereotype that 2SLGBTQIA+ people are abnormal.

Do not presume you can identify a person's sexual orientation by looking at or talking to them. Furthermore, do not assume 2SLGBTQIA+ people will "come out" to you. Many 2SLGBTQIA+ people have faced and continue to face regular discrimination, so they may be cautious about disclosing their identities. However, using gender-neutral terminology like a partner and avoiding other biased language mentioned previously may create a climate in which a 2SLGBTQIA+ person feels comfortable disclosing their sexual orientation identity. Conversely, the casual use of phrases like "that's gay" to mean "that's stupid" may create an environment in which 2SLGBTQIA+ people do not feel comfortable.

Ability

People who are differently-abled or have disabilities make up a diverse group that has increasingly come to be viewed as a cultural identity group. People without disabilities are often referred to as able-bodied. As with sexual orientation,

comparing people with disabilities to “normal” people implies that there is an agreed-upon definition of what is “normal” and that people with disabilities are “abnormal.” People who fall into the category may prefer the term differently abled or prefer disability to the word handicap.

It is also essential to remember that just because someone is disabled does not mean they are also handicapped. The environment around them, rather than their disability, often handicaps people with disabilities (APA, 2020). Ignoring the environment as the source of a handicap and placing it on the person fits into a pattern of reducing people with disabilities to their disability — for example, calling someone a parapalegic instead of a person with paraplegia. In many cases, as with sexual orientation, race, age, and gender, verbally marking a person as different is irrelevant. The language used in conjunction with disabilities also tends to portray people as victims of their disability and paint pictures of their lives as gloomy, dreadful, or painful. Such descriptors are often generalizations or completely inaccurate.

Activity: Check Your Understanding



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https://openbooks.macewan.ca/professionalcommunication/?p=983#h5p-41

Key Takeaways

- Names can impact how we perceive others. They can also impact how we feel about ourselves.
- We can increase affiliation with others by converging our language with theirs. We can decrease affiliation with others by diverging our language from theirs.
- Sexism and racism can be displayed through our language choices. It is important to be aware of the words we use so we do not come across as sexist or racist.

Exercises

1. Create a list of names you have heard that are unique. What makes these names unique and memorable? Ask friends to give you their perceptions of those names. Does that match what you think? Why or why not?
2. Engage in a normal conversation with a friend or family member. Without them knowing what you are doing, slowly and subtly converge your communication style to theirs. Record your observations. Then, with the same person, try to diverge your communication style. Re-record your observations. Ask if the person noticed any communication changes. How did it make them feel? How did you feel? Why?
3. Make a list of words in the English language that can be considered sexist or racist. Determine how they are sexist or racist, then provide alternatives for these words that are more politically correct.

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3.3 Types of Language

Learning Objectives

- Differentiate between informal and formal language.
- Describe the different types of informal language.
- Describe the types of improper language.

Suppose you read or watch different types of programming. You probably notice a difference in language use based on the environment, who is being spoken to, and the reason for communicating. This section will discuss different types of language, as this impacts how others view you and whether they will view you positively or negatively.

Formal versus Informal Language

You probably know that how we communicate in different contexts can vary greatly. For example, when you compose a text to your best friend you will use different grammatical structures and words than when you compose an email to your professor. One of the main reasons for this difference is because of formal (professional) and informal language. Below is a general overview of the major differences between formal and informal language.

Formal Language (Professional)

- Used in carefully edited communication.
- Used in academic or official content.
- Sentence structure is long and complicated.
- Emphasis is on grammatical correctness.

- Uses the passive voice.
- Speakers or writers avoid the use of contractions.
- Avoids the inclusion of emotionally laden ideas and words.
- Language should be objective.
- Language should avoid the use of colloquialisms.
- Language is gender-neutral.

Informal Language (Nonprofessional)

- Used in impromptu, conversational communication.
- Used in everyday communication.
- Sentence structure is short, choppy, and improvised.
- Emphasis is on easily understood messages using everyday phrases.
- Uses the active voice.
- Contractions are often used.
- Allows for the inclusion of emotions
- Language can be subjective.
- It is perfectly appropriate to use colloquialisms.
- Language includes gender references.

Formal Language — Professional

When applying for a job, you will most likely use formal language in your cover letter and resume. Formal language is an official, academic, and professional language. You want to appear intelligent and competent, so formal language helps you accomplish those goals. Formal language often occurs when we write using full sentences, and is grammatically correct. Formal language is objective and complex. Formal language is expected when communicating in health care environments.

Informal Language

Informal or nonprofessional language is common, everyday language, which might include slang words. It is continuous and casual. We use informal language when

we talk to other people. It is more simple. Informal language tends to use more contractions and abbreviations. If you look at your text messages, you will probably see several examples of informal language.

Jargon

Jargon is the specialized or technical language of a specific group or profession that outsiders may not understand (Murray, 2012, p. 147). If you are really into cars or computers, you probably know a lot about their different parts and functions and might use words specifically related to those. Jargon is normally used in a specific context and may or may not be understood outside that context. Jargon consists of a specific vocabulary that uses words or acronyms that only certain people understand. Health care is full of jargon such as the examples below.

- sundowner
- abrasion
- abscess
- acute
- benign
- SOBOE
- ADHD

Chances are you have heard a few jargon phrases in your workplace or even found yourself using a few of them. Your workplace may even have some specific jargon only used in your organization. Take a minute and think about all the jargon you hear on average.

Colloquialisms

Colloquialism uses informal words in communication (Trudgill, 2000, p. 17). Colloquialism varies from region to region. Examples might be “wanna” instead of “want to” or “gonna” instead of “going to.” It shows us how society uses language in everyday life. Here’s a short list of some common colloquialisms you may have used yourself:

- bamboozle — to deceive
- be blue — to be sad
- beat around the bush — to avoid a specific topic
- buzz off — go away
- fell through the cracks — to be neglected
- go bananas, or go nuts — be very angry
- gobsmacked — shocked
- gonna — going to
- hit a writer's block — unable to write
- hit the hay — to go to sleep

Slang

Slang refers to words employed by certain groups, such as young adults and teens (Mattiello, 2008). Slang is more commonly used when speaking rather than writing. Slang is often used between people who are similar and have experience with each other. Here is a list of some common slang terms you might use in your day-to-day life:

- BAE (baby / before all else)
- on fleek (looking perfect)
- bye Felica (saying goodbye to someone you do not like)
- the tea (gossip)
- cash (money)
- cheesy (cheap or tacky)
- frenemy (someone who is both a friend and an enemy)
- thirsty (being overly eager or desperate)
- woke (being acutely aware of social injustice within society)
- all Gucci (everything is fine)

How many of these slang words do you use? What other slang words do you find yourself using? When it comes to slang, it is important to understand that it is constantly evolving. What is common slang today could be completely passé tomorrow. What is common slang in Canada is not universal in English-speaking countries. Also, consider if any of the above has a place in professional communication.

Idioms

Idioms are expressions or figures of speech whose meaning cannot be understood by looking at the individual words and interpreting them literally (Nunberg et al., 1994). Idioms can help amplify messages, and can be used to provide artistic expression. For instance, “knowledge is power!”

Idioms can be hard to grasp for speakers and contribute to misunderstandings or miscommunication. Consider whether any idioms have a place in professional communication.

Examples:

- a breath of fresh air (Refreshing or fun. She is a breath of fresh air)
- a gut feeling (Feeling in the stomach. I have a gut feeling that everything will turn out all right).
- a change of heart (Change my mind. I’ve had a change of heart. I am not going to the party).
- get out of the wrong side of the bed (In a bad mood. He must have gotten up out of the wrong side of the bed today).
- see eye to eye (Agree. He does not see eye to eye with his parents at all).

Clichés

Clichés are ideas or expressions that have been so overused they have lost their original meaning (Blake & Bly, 1993, p. 85). Clichés are common and are often heard. For instance, “light as a feather” or “happily ever after” are common clichés. They are important because they express ideas and thoughts that are popular in everyday use. They are prevalent in advertisements, television, and literature.

Improper Language

Improper language is not proper, correct, or applicable in certain situations. Two such types of improper language are vulgarity and cursing. Vulgarity includes language that is offensive or lacking in good taste. Often, vulgar language is lewd

or obscene. Cursing includes wishing evil, doom, or misfortune on a person or group. It can also include curses or profane words. People might differ in their perceptions about what constitutes improper language, but there is no place for it in professional communication.

Ambiguous Language

Ambiguous language can have various meanings. Sometimes this includes very abstract advertisements. For instance, a restaurant ad reads, “People are our best ingredient!” What comes to mind when you hear that? Are they using people in their food? Or do they mean their customer service is what makes their restaurant notable? When communicating with others, we must be clear in our language. We need others to know exactly what we mean and not imply meaning. That is why you need to ensure you do not use ambiguous language.

Euphemisms

Euphemisms also make language unclear. People use euphemisms to say something more politely or less bluntly. For instance, instead of telling your parent or guardian that you failed a test, you might say you did suboptimally. People use euphemisms because they sound better and seem a better way to express their feelings. People use euphemisms all the time. For instance, instead of saying a person died, they might say the person passed away. Instead of saying that someone farted, you might say someone passed gas. How prevalent are euphemisms in health care environments? Do euphemisms have a place in professional communication?

Relative Language

Relative language depends on the person communicating. People’s backgrounds vary; hence, their perspectives will vary. A professor at one college might complain about her salary while those at another would love to have a salary like hers. In other

words, our language is based on our perception of our experiences. For instance, if someone asked you what your ideal salary would be, would it be based on your previous salary? Or that of our parents? Your friends? Language is relative for that reason. Would you consider a meal at a restaurant to be expensive if the meal cost $200 for two people? How about $100? How about $50?

Static Evaluation

Often, we think that people and things do not change, but they do. You might see people who go through amazing transformations through social media sites such as Instagram, perhaps through weight loss, a makeover, or surgery. These people changed.

Static evaluation states that things are not constant. Things vary over time, and our language should represent that change. An example is making a statement such as "Max is bad." It is important to note that Max might be bad at this point or may have displayed bad behaviour previously, but it may not represent how Max will be in the future.

Key Takeaways

- Formal language is expected when communicating professionally, whereas informal language is appropriate in casual conversation.
- Informal language includes jargon, or technical language; colloquialism, or informal expressions; slang, or nonstandard language; idioms, or expressions or figures of speech; clichés; ambiguous language; and static evaluation.

Exercises

1. Create a list of jargon or slang words that apply to your area of study and define what they mean.
2. Create a list of colloquialisms or idioms that apply to your area of study. Ask someone outside of your area of study if these words make sense.
3. Find clichés that are used in other cultures. See if you can find a North American equivalent of each cliché.
4. For the entire day, take a minute to pause before you text or email someone. When we text or email someone, we typically just put our thoughts together in a quick fashion. Take a second to decide how you plan to use your words. Think about which words would be best to get your message across effectively. After you have typed the message, take another few minutes to reread the message. Be mindful of how others might interpret the message. Would they read it at face value, or would they misinterpret the message?

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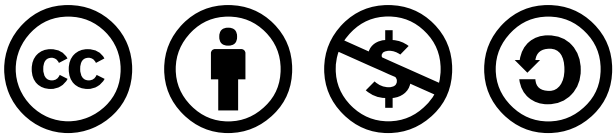
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3.4 Improving Verbal Communication

Learning Objectives

- Examine ways to improve your vocabulary and verbal communication skills.
- Increase your awareness and adaptation of language.
- Realize the importance of checking for understanding.

In this chapter, you have learned the importance of language. This last section will discuss ways to improve your verbal communication skills. To be a great interpersonal communicator, it is extremely important that you also know how to use language most effectively.

Improving Language Skills

You probably had words you used most frequently from an early age because you were familiar with those words. As you get older and become more educated, your vocabulary expands to help you succeed. Language is used to help express our feelings, intentions, and comprehension of others (Khan, 2015). An extensive vocabulary is a keen predictor of someone's social status, education, and profession. Whether you like it or not, the words we use and the grammatical structure of how we use them can impact our standing in school, work, and society. Here are some tips to help you improve your vocabulary.

Use Repetition

First, be sure to use repetition. To become familiar with a word, you need to see it repeatedly. Besides, you need to use it in conversations over and over again. The more times you repeat the word, the more likely you will memorize it, and it will become part of your daily repertoire.

Group Similar Words Together

Second, group similar words together. You should never learn vocabulary by looking at a list of words. Think of words as different pieces of a jigsaw puzzle. It does not make sense to look at each puzzle piece individually. Rather, you need to fit them together to see the whole picture. The same thing should occur with words. You should memorize words that have similarities in some way. For instance, create a vocabulary around a theme, such as music, or an adjective, such as beautiful.

Build Your Vocabulary

Third, it is essential to make vocabulary that is personal to you. Vocabulary can be defined as all words a person or group understands. A baby can distinguish between language sounds and other sounds as early as four months of age. According to David Crystal {2006), language acquisition happens quite rapidly:

- By age 2, people can recognize and speak 200 words.
- By age 3, people can recognize and speak about 2000 words.
- By age 5, people can recognize and speak about 4,000 words (Crystal, 2006).

Your average infant to toddler learns three to four new words daily. Infants are hardwired to learn a language. If you want to ensure your child can speak multiple languages, exposing them to multiple languages during this crucial developmental cycle is best. Even though we start as infants, we continue to improve our vocabularies right through middle age:

- Most adult test-takers range from 20,000–35,000 words

- Average test-takers of age eight already know 10,000 words
- Average test-takers of age four already know 5,000 words
- Adult test-takers learn almost one new word a day until middle age
- Adult test-taker vocabulary growth stops in middle age

As you can see, most English-speaking adults have fairly substantial vocabularies, but we do see a drop in new language acquisition as people enter their middle age. As such, it is essential to keep learning.

One way to keep learning is to find words that have meaning. If you have ever heard a story about survival from someone who has gone through something life-changing, they probably used words that touched you and helped you to connect to the story. Similarly, you should find words that can relate to your story. When we find words with personal meaning, we can use those words more effectively in our vocabulary. Here are some essential tips for building your vocabulary:

- Keep a journal of words you do not know.
- If you don't know a word, look it up in a dictionary.
- Learn to recognize both the Latin and Greek roots of words.
- Play vocabulary games (e.g., anagrams, Wordle, crossword puzzles, Scrabble, etcetera).
- Make synonym and antonym word lists.
- Take a writing and/or editing course.

Read

Lastly, you should read regularly. It does not matter what you read. As long as you are reading, you will probably come across words that you are unfamiliar with. When you do come across a word you do not know, take the time to look it up. This practice is critical when reading academic works because they often contain ten-thousand-dollar words. Next time you read and run across a word you do not know, find the definition to comprehend what is being said.

Increase Your Awareness and Adaptation of Language

After learning to improve your vocabulary, increasing language awareness and adaptation is essential. When we talk about language awareness, we refer to a person's ability to be mindful and sensitive to all functions and forms of language (Svalberg, 2007).

Language adaptation is the ability to alter one's linguistic choices in a communicatively competent manner. As such, it is not just about being aware of language that leads to effective interpersonal interactions, but our ability to adapt our linguistic choices with different people to maximize the effectiveness of our interpersonal communication.

People can increase their language awareness and adaptation in a couple of ways. The first way is to communicate meaningfully with someone different from you. This person can be from a different country or region of the country from you. When you speak to someone very different from you, you might notice how they use language differently or prefer certain words over others.

Another way might be to watch a foreign film. Check out different international films that have been nominated for an Academy Award. Most of them will be dubbed in English or have English subtitles. Pay attention to how the characters communicate with each other to create meaning. Does it give you an appreciation for how you speak?

Lastly, spend some time with a small child, preferably under five. Pay attention to how the child communicates with you versus others (e.g., their friends, parents/guardians, siblings). Children under five are still acquiring words and learning to talk. Communicating with someone with a very limited vocabulary might help you see how you can adapt your language so that they will understand you.

Check For Understanding

As a speaker, you want to know that the receiver of your message understood what you said. This concept is also known as **checking for understanding** or verifying that what has been said is understood (Rauschenbach, 1994). Even if a person

is smiling and nodding at you when you talk, it does not necessarily mean they are paying attention to everything. They might be trying to be polite or friendly. The best way to check for understanding is to use the acronym **TAP**. Think of communication like a tap dance; if you do not hear any tapping, would it be a tap dance? The same thing can be applied to communication. Did you effectively communicate if the other person did not understand what you were trying to say?

First, the **T** in TAP means to talk. In other words, you explicitly present all the content. As you are talking, you also try to ensure that the other person is listening to you talk.

Second, the **A** in TAP stands for asking questions. After you talk to the person, try to ask specific questions. Rather than saying, "Did you hear me?" or "Were you listening," which are both yes/no questions, it would be more beneficial to ask, "What did I just say?" or "What did you hear me say?"

Third, the **P** in TAP means to be prepared to listen. Listen carefully to what the other person says. During this phase, you can see if they understood your message. Was the message correct? What emotions are they displaying after you sent the message and asked questions? If we do not ask questions, we cannot be sure that the message was received effectively.

Key Takeaways

- Ways to help you improve your vocabulary include using repetition, grouping like words together, building your vocabulary, and increasing your reading.
- Increasing awareness involves a person's ability to be mindful and sensitive to all functions and forms of language.
- Enhancing adaptation of language involves the ability to alter one's linguistic choices in a communicatively competent manner.
- Three basic steps to ensure understanding include T (talk first), A (ask questions), and P (prepare to listen).

Exercises

1. Review the various key terms within this chapter. Did you know all of the definitions before reading this chapter? Which terms did you find difficult to understand? Why?
2. Reflect on a recent interaction with a friend or a client in your practice area. Were you able to utilize the TAP Method for understanding? How easy was it for you to understand the other person? Why? How did it feel to use the TAP method? Were you effective during your interpersonal interaction? Why?

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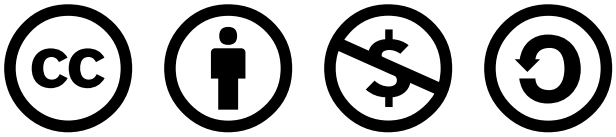
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CHAPTER 4: NONVERBAL COMMUNICATION

When we think about communication, we often focus on exchanging information using words. While verbal communication is important, humans relied on nonverbal communication for thousands of years before we could communicate with words. Nonverbal communication generates meaning using behaviour other than words (Depaulo & Friedman, 1998). Rather than considering nonverbal communication as the opposite of or separate from verbal communication, viewing them as operating side by side is more accurate — as part of the same system.

The content and composition of verbal and nonverbal communication also differ. In terms of content, nonverbal communication tends to communicate emotions more so than verbal communication. In terms of composition, although there are rules of grammar that structure our verbal communication, no official guides govern our use of nonverbal signals. Likewise, there are no dictionaries and thesauruses of nonverbal communication as there are with verbal symbols. Finally, whereas we humans are unique in our capacity to abstract and transcend space and time using verbal symbols, we are not the only creatures that engage in nonverbal communication (Hargie, 2011).

These are just some of the characteristics that differentiate verbal communication from nonverbal. In this chapter, we will discuss in more detail the principles, functions, and types of nonverbal communication and conclude with some guidance on improving our nonverbal communication competence.

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4.1 Principles and Functions of Nonverbal Communication

Learning Objectives

- Compare and contrast verbal communication and nonverbal communication.
- Discuss the principles of nonverbal communication.
- Provide examples of the functions of nonverbal communication.

All five senses can take in nonverbal communication. Health professionals rely on touch, an especially powerful form of nonverbal communication.

We must distinguish between vocal and verbal aspects. Verbal and nonverbal communication includes both vocal and nonvocal elements.

A **vocal element** of verbal communication is spoken words — for example, saying, “Come back here.” **Paralanguage** is a vocal element of nonverbal communication, which is the vocalized but not verbal part of a spoken message, such as speaking rate, volume, and pitch. **Nonvocal elements** of verbal communication include using unspoken symbols to convey meaning. Writing and American Sign Language (ASL) are nonvocal examples of verbal communication and are not considered nonverbal. Nonvocal communication elements include body language, gestures, facial expressions, and eye contact. Gestures are both nonvocal and nonverbal since most do not refer to a specific word like a written or signed symbol does. Relationships among vocal, nonvocal, verbal, and nonverbal aspects of communication are shown below (Hargie, 2011, p. 45).

Principles of Nonverbal Communication

Nonverbal communication has a distinct history and separates evolutionary functions from verbal communication. For example, nonverbal communication is primarily biological, while verbal communication is primarily culturally based. This is evidenced by the fact that some nonverbal communication has the same meaning across cultures, while no verbal communication systems share the same universal recognizability (Andersen, 1999). Nonverbal communication evolved earlier than verbal communication, serving an essential survival function that helped humans later develop verbal communication. While some of our nonverbal communication abilities, such as our sense of smell, lost strength as our verbal capacities increased, other abilities, such as paralanguage and movement, have grown alongside verbal complexity.

Nonverbal Communication Conveys Important Interpersonal and Emotional Messages

You have probably heard that more meaning is generated from nonverbal communication than from verbal. Mehrabian (1997) asserted that as much as 93% of meaning in any interaction is attributable to nonverbal communication. Of the three main elements of communication — vocalics (such as tone of voice), verbal (words), and body language — words account for only 7%. Regardless of the actual percentage, it is worth noting that the majority of meaning in interaction is deduced from nonverbal communication.

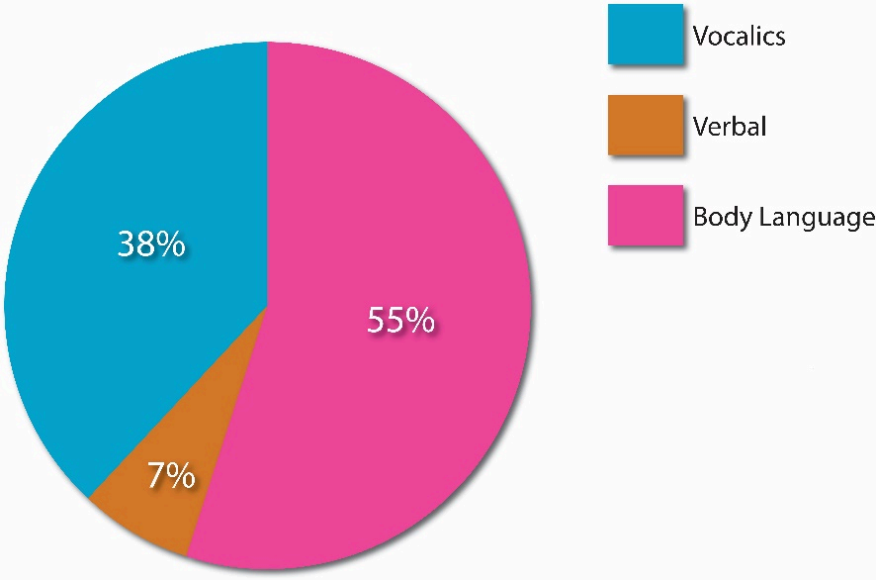


Figure 4.1.1. Derivation of meaning relies less on words than on nonverbal communication.

We may rely more on nonverbal signals when verbal and nonverbal messages conflict and when emotional or relational communication occurs (Hargie, 2011, p. 47). For example, when someone asks a question, unsure about the "angle" they are taking, we may hone in on nonverbal cues to fill in the meaning. The question "What are you doing tonight?" could mean many things: we rely on posture, tone of voice, and eye contact to see if the person asking is just curious, suspicious, or hinting that they would like company for the evening. We also put more weight on nonverbal communication when determining a person's credibility. For example, if a health professional verbally speaks with a client, the content seems well-researched and unbiased. Still, if their nonverbal communication is poor (voice is monotone, avoids eye contact, fidgets), and the health professional will likely not be viewed as credible. Conversely, verbal communication might have more meaning in some situations than nonverbal communication. In interactions where information exchange is the focus — at a briefing at work, for example — verbal communication likely accounts for much more of the meaning generated. A fundamental principle of nonverbal communication is that it often takes on more meaning in interpersonal and emotional exchanges.

Nonverbal Communication is More Involuntary than Verbal

There are some instances in which we verbally communicate involuntarily. These types of exclamations are often verbal responses to a surprising stimulus. For example, we say "Oww!" when we stub our toe or scream "Stop!" when we see someone heading toward danger. Involuntary nonverbal signals are much more common. Although most nonverbal communication is not entirely involuntary, it is more below our consciousness than verbal communication and, therefore, more difficult to control.

This involuntary nature of nonverbal communication makes it more difficult to control or "fake." For example, although you can consciously smile and shake hands with someone when you first see them, it is difficult to fake that you are "happy" to meet someone. Nonverbal communication leaks out in ways that expose our underlying thoughts or feelings. Health professionals and students in health studies must learn to control their facial expressions and other nonverbal communication to effectively convey their message without having their thoughts and feelings leak through.

Have you ever tried to conceal your surprise, suppress your anger, or act joyful even when you were not? Most people whose careers do not involve conscious manipulation of nonverbal signals find controlling or suppressing them challenging. While we can consciously decide to stop sending verbal messages, our nonverbal communication always has the potential to generate meaning for another person. The teenager who decides to shut out his dad and not verbally communicate with him still sends a message with his "blank" stare (still a facial expression) and lack of movement (still a gesture). In this sense, nonverbal communication is "irrepressible" (Andersen, 1999).

Nonverbal Communication is More Ambiguous

Language's symbolic and abstract nature can lead to misunderstandings, but nonverbal communication is even more ambiguous. As with verbal

communication, most of our nonverbal signals can be linked to multiple meanings, but unlike words, many nonverbal signals do not have one specific meaning. If you have ever had someone wink at you and did not know why you have probably experienced this uncertainty. Did they wink to express their affection for you, their pleasure with something you just did, or because you share some inside knowledge or joke?

Just as we look at context clues in a sentence or paragraph to derive meaning from a particular word, we can look for context clues in various sources of information, such as the physical environment, other nonverbal signals, or verbal communication to make sense of a particular nonverbal cue. Unlike verbal communication, nonverbal communication does not have explicit rules of grammar that bring structure, order, and agreed-upon usage patterns. Instead, we implicitly learn norms of nonverbal communication, which leads to more significant variance. In general, we exhibit more idiosyncrasies in our usage of nonverbal communication than in verbal communication, which also increases the ambiguity of nonverbal communication.

Nonverbal Communication is More Credible

Although we can rely on verbal communication to fill in the blanks sometimes left by nonverbal expressions, we often put more trust into what people do over what they say. This is especially true in times of stress or danger when our behaviour becomes more instinctual, and we rely on older systems of thinking and acting that evolved before our ability to speak and write (Andersen, 1999). This innateness creates intuitive feelings about the genuineness of nonverbal communication, and this genuineness relates to our earlier discussion about the sometimes involuntary and often subconscious nature of nonverbal communication. An example of the innateness of nonverbal signals can be found in children who have been blind since birth but still exhibit the same facial expressions as sighted children. In short, nonverbal communication's involuntary or subconscious nature makes it less easy to fake, making it seem more honest and credible.

Functions of Nonverbal Communication

A primary function of nonverbal communication is to convey meaning by reinforcing, substituting for, or contradicting verbal communication. Nonverbal communication is also used to influence others and regulate conversational flow. Perhaps even more important are how nonverbal communication functions as a central part of relational communication and identity expression.

Nonverbal Communication Conveys Meaning

As we have established, nonverbal communication plays an important role in communicating successfully and effectively and cannot be underestimated.

Complementing

Complementing is defined as nonverbal behaviour combined with the verbal portion of a message to emphasize the meaning of the entire message. Regarding complementing verbal communication, gestures can help describe a space or shape that another person is unfamiliar with in ways that words alone cannot. Gestures also reinforce basic meaning — pointing to the door when you tell someone to leave. Facial expressions reinforce the emotional states we convey through verbal communication (Hargie, 2011, p. 46); smiling while telling a funny story better conveys your emotions. Vocal variation can help us emphasize a particular part of a message, which helps reinforce a word or sentence's meaning. For example, "How was *your* weekend?" conveys a different meaning than "How was your *weekend*?" An excellent example of complementing behaviour is when a child exclaims, "I'm so excited," while jumping up and down. The child's body further emphasizes, "I'm so excited."

Contradicting

At times, an individual's nonverbal communication **contradicts** their verbal

communication. Because we often perceive nonverbal communication as more credible than verbal communication, this is especially true when we receive mixed messages or messages in which verbal and nonverbal signals contradict each other. For example, a person may say, "You cannot do anything right!" in a mean tone but follow that up with a wink, which could indicate the person is teasing or joking, or a person could say, "I am fine" in a quick, short tone that indicates otherwise. Mixed messages lead to uncertainty and confusion for the receivers, which leads us to look for more information to determine which message is more credible. If we cannot resolve the discrepancy, we will likely react negatively and potentially withdraw from the interaction (Hargie, 2011, p. 52). Persistent mixed messages can lead to relational distress and hurt a person's credibility in professional settings.

Accenting

Accenting is a form of nonverbal communication that emphasizes a word or a part of a message. The word or part of the message accented might change the meaning of the message. Accenting can be accomplished through multiple types of nonverbal behaviour. Gestures paired with a word can provide emphasis, such as when an individual says, "No (slams hand on table), you do not understand me." By slamming the hand on a table while saying "no," the source draws attention to the word. Vocalic cues also allow us to emphasize particular parts of a message, which helps to determine the meaning (e.g., "*She* is my friend," or "She is *my* friend," or "She is my *friend*"). Additionally, words or phrases can also be emphasized via pauses. Speakers will often pause before saying something important. Your professors likely pause just before relaying important information to the course content.

Repeating

Nonverbal communication that **repeats** the meaning of verbal communication assists the receiver by reinforcing the sender's words. Nonverbal communication that repeats verbal communication may stand alone, but when paired with verbal communication, it repeats the message. For example, nodding one's head while

saying “yes” reinforces the meaning of the word “yes,” and the word “yes” reinforces the head nod, or saying “I am not sure” with an uncertain tone.

Regulating Conversational Flow

Conversational interaction has been likened to a dance, where each person has to make moves and take turns without stepping on the other’s toes. Nonverbal communication helps us regulate our conversations so we do not constantly interrupt each other or wait in awkward silence between speaker turns. **Pitch**, a part of vocalics, helps cue others into our conversational intentions. A rising pitch typically indicates a question and a falling pitch indicates the end of a thought or the end of a conversational turn. We can also use a falling pitch to indicate closure, which can be very useful at the end of a speech to signal to the audience that you are finished, which cues the applause and prevents an awkward silence that the speaker ends up filling with “That’s it” or “Thank you.”

Other behaviours that regulate conversational flow are **eye contact**, moving or leaning forward, changing posture, and eyebrow raises, to name a few. You may also have noticed several nonverbal behaviours people engage in when trying to exit a conversation. These might include stepping away from the speaker, checking one’s watch or phone for the time, or packing up belongings. These are referred to as **leave-taking behaviours**. Without the regulating function of nonverbal behaviours, it would be necessary to interrupt conversational content to insert phrases such as “I have to leave.” Repeating a hand gesture or using one or more verbal fillers can extend our turn even though we are not verbally communicating. We can “hold the floor” with nonverbal signals even when we are unsure what to say next. However, verbal communication will be used instead when interactants fail to recognize regulating behaviour.

Substituting

Nonverbal communication can **substitute** for verbal communication in a variety of ways. Nonverbal communication can convey much meaning when verbal communication is ineffective because of language barriers. Language barriers exist

when a person has not yet learned to speak or loses the ability to speak. For example, babies who have not yet developed language skills make facial expressions at a few months old that are similar to those of adults and, therefore, can generate meaning (Oster et al., 1992). People who have developed language skills but cannot use them because they have temporarily or permanently lost them or are using incompatible language codes, as in some cross-cultural encounters, can still communicate nonverbally. Although it is always a good idea to learn some of the languages of a client who may not speak the same language as you, gestures such as pointing or demonstrating the size or shape of something may suffice in fundamental interactions.

Nonverbal communication is also helpful in a quiet situation where verbal communication is disturbing; for example, you may gesture to signal to your professor that you are ready to leave the classroom. Crowded or loud places can impede verbal communication and lead people to rely more on nonverbal messages. Getting a server or bartender's attention with a hand gesture is more polite than yelling, "Hey you!" Finally, sometimes we know it is better not to say something aloud. If you want to point out a person's unusual outfit or signal to a friend that you think his or her date is incompatible, you are probably likelier to do that nonverbally.

Influencing Others

Nonverbal communication can be used to **influence** people in a variety of ways, but the most common way is through deception. **Deception** is typically thought of as the intentional act of altering information to influence another person, which extends beyond lying to include concealing, omitting or exaggerating information. At the same time, verbal communication is to blame for the content of the deception; nonverbal communication partners with language in deceptive acts to make them more convincing. Since most intuitively believe that nonverbal communication is more credible than verbal communication, we often intentionally try to control our nonverbal communication when using deception. Likewise, we evaluate other people's nonverbal communication to determine the veracity of their messages. Students initially seem surprised when we discuss the prevalence of deception, but their surprise diminishes once they realize that deception is not

invariably malevolent, mean, or hurtful. Deception has negative connotations, but people use deception for many reasons, including to excuse their mistakes, be polite to others, or influence others' behaviours or perceptions.

The fact that deception served a crucial evolutionary purpose helps explain its prevalence among humans today. Species that are capable of deception have a higher survival rate. Other animals engage in nonverbal deception that helps them attract mates, hide from predators, and trap prey (Andersen, 1999). To put it bluntly, the better at deception a creature is, the more likely it is to survive. So, over time, the humans who were better liars were the ones whose genes were passed on. However, the fact that lying played a part in our survival as a species does not give us a license to lie.

Aside from deception, we can use nonverbal communication to "take the edge off" a critical or unpleasant message to influence the other person's reaction. We can also use eye contact and proximity to get someone to move or leave an area. For example, hungry diners waiting to snag a first-come-first-serve table in a crowded restaurant send messages to the people who have already eaten and paid that it is time to go. People on competitive reality television shows such as *Survivor* and *Big Brother* play what they call a "social game." The social aspects of the game involve the manipulation of verbal and nonverbal cues to send strategic messages about oneself in an attempt to influence others. Nonverbal cues such as the length of a conversational turn, volume, posture, touch, eye contact, and choices of clothing and accessories can become part of a player's social game strategy. Although reality television is not a reflection of real life, in real life, people do engage in competition and strategically change their communication to influence others, making it essential to be aware of how we nonverbally influence others and how they may try to influence us.

Affecting Relationships

To successfully relate to others personally and professionally, we must possess some skill at encoding and decoding nonverbal communication. The nonverbal messages we send and receive influence our relationships positively and negatively and can work to bring people together or push them apart. Nonverbal communication in the form of tie signs, immediacy behaviours, and expressions of emotion are

just three examples illustrating how nonverbal communication affects our relationships.

Tie signs are nonverbal cues that communicate intimacy and signal the connection between two people. These **relational indicators** can be objects like wedding rings or tattoos that symbolize another person or the relationship, actions like sharing the same drinking glass or touch behaviours such as handholding (Afifi & Johnson, 2005, p. 190). Touch behaviours are the most frequently studied tie signs and can communicate much about a relationship based on the area being touched, the length of time, and the intensity of the touch. Kisses and hugs, for example, are considered tie signs, but a kiss on the cheek is different from a kiss on the mouth, and a full embrace is different from a half embrace. If you consider yourself a "people watcher," note the various tie signs you see people use and what they might say about the relationship.

Immediacy behaviours play a central role in bringing people together and have been identified by some scholars as the most crucial function of nonverbal communication (Andersen & Andersen, 2005). **Immediacy behaviours** are verbal and nonverbal behaviours that lessen the real or perceived physical and psychological distance between communicators and include things such as smiling, nodding, making eye contact, and occasionally engaging in social, polite, or professional touch (Comadena et al., 2007). Immediacy behaviours are a good way of creating rapport or a friendly and positive connection between people. Skilled nonverbal communicators are more likely to create rapport with others due to attention-getting expressiveness, warm initial greetings, and an ability to get "in tune" with others, which conveys empathy (Riggio, 1992, p. 12). These skills are essential to help initiate and maintain relationships.

While verbal communication is our primary tool for solving problems and providing detailed instructions, nonverbal communication is our primary tool for communicating emotions. Touch and facial expression are two primary ways we express emotions non-verbally. Love is a primary emotion we express nonverbally and forms the basis of our close relationships. Although no single facial expression for love has been identified, it is expressed through prolonged eye contact, close interpersonal distances, increased touch, and increased time spent together, among other things. Given many people's limited emotional vocabulary, nonverbal expressions of emotion are central to our relationships.

Expressing Our Identities

Nonverbal communication expresses who we are. Our identities (the groups to which we belong, our cultures, our hobbies and interests, and so on) are conveyed nonverbally through the way we set up our living and working spaces, the clothes we wear, the way we carry ourselves, and the accents and tones of our voices. Our physical bodies give other impressions about who we are; some of these features are more under our control than others. Height, for example, has been shown to influence how people are treated and perceived in various contexts. Our level of attractiveness also influences our identities and how people perceive us. Although we can temporarily alter our height or looks — for example, with different shoes or coloured contact lenses—we can only permanently alter these features using more invasive and costly measures such as cosmetic surgery. We have more control over other aspects of nonverbal communication regarding how we communicate our identities. For example, the way we carry and present ourselves through posture, eye contact, and tone of voice can be altered to present ourselves as warm or distant, depending on the context.

Aside from our physical body, artifacts, the objects and possessions surrounding us also communicate our identities. Examples of artifacts include our clothes, jewelry, and space decorations. In all the previous examples, **implicit norms or explicit rules** can affect how we nonverbally present ourselves. For example, in a particular workplace, it may be a norm (implicit) for people in management positions to dress casually, or it may be a rule (explicit) that different levels of employees wear different uniforms or follow particular dress codes. We can also use nonverbal communication to express identity characteristics that do not match up with who we think we are. Through changes to nonverbal signals, a capable person can try to appear helpless, a guilty person can try to appear innocent, or an uninformed person can try to appear credible.

Activity: Check Your Understanding

An interactive H5P element has been excluded from this version of the text. You can view it online here: https://openbooks.macewan.ca/professionalcommunication/?p=114#h5p-47

Key Takeaways

- Nonverbal communication is a process of generating meaning using behaviour other than words. Nonverbal communication includes vocal elements, referred to as *paralanguage* and pitch, volume, and rate, and nonvocal elements, usually referred to as *body language,* including gestures, facial expressions, and eye contact, among other things.
- Nonverbal communication serves several functions: Nonverbal communication affects verbal communication in that it can complement, substitute, contradict, accentuate, repeat, and regulate.
- Nonverbal communication regulates the conversational flow, providing essential cues that signal the beginning and end of conversational turns and facilitate the beginning and end of an interaction.
- Nonverbal communication affects relationships, as it is a primary means through which we communicate emotions, establish social bonds, and engage in relational maintenance.
- Nonverbal communication expresses our identities, as who we are is conveyed through how we set up our living and working spaces, the clothes we wear, our presentation, and the tones in our voices.

Exercises

1. To better understand nonverbal communication, imagine an example to illustrate each of the principles discussed in the chapter. Be integrative by including at least one example from an academic, professional, and personal context.
2. When someone sends you a mixed message in which the verbal and nonverbal messages

contradict each other, which one do you place more meaning on? Why?

3. Our professional presentation, dress style, and surroundings, such as an office, clinic, or hospital environment, send nonverbal messages about our identities. Analyze some of the nonverbal signals that your professional presentation or environment sends. What do they say about who you are? Do they create the impression that you desire?

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Image Attributions

Figure 4.1.1. Mehrabian, A. (1971). *Silent messages*. Wadsworth.

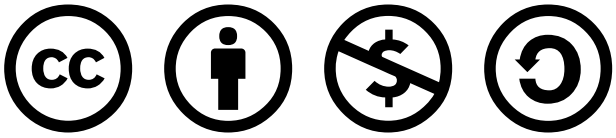
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4.2 Types of Nonverbal Communication

Learning Objectives

- Define kinesics.
- Define haptics.
- Define vocalics.
- Define proxemics.
- Define chronemics.
- Provide examples of types of nonverbal communication that fall under these categories.
- Discuss how personal presentation and environment provide nonverbal cues.

Just as verbal language is categorized in various ways, there are also different types of nonverbal communication. As we learn about each type of nonverbal signal, remember that nonverbals often work together, combining to repeat, modify, or contradict the verbal message.

Kinesics

Kinesics comes from the root word *kinesis*, which means "movement" and refers to the study of hand, arm, body, and face movements (Harrigan, 2005). Specifically, this section will outline gestures, head movements and posture, eye contact, and facial expressions as nonverbal communication.

Gestures

There are three main types of **gestures**: adaptors, emblems, and illustrators (Andersen, 1999). **Adaptors** are touch behaviours and movements that indicate internal states typically related to arousal or anxiety. Adaptors can be targeted toward the self, objects, or others. In regular social situations and healthcare environments, adaptors result from uneasiness, anxiety, or a general sense that we are not in control of our surroundings. Many of us subconsciously click pens, tap our feet, or engage in other adaptors during classes, exams, meetings, or while waiting as a way to do something with our excess energy. If you were to watch yourself on video recordings (most students have to do this for exams or assignments), you would likely notice nonverbal adaptors you did not know you used. In stressful situations, people most commonly use self- or object-focused adaptors. Common self-touching behaviours such as scratching, twirling hair, or fidgeting with fingers or hands are considered self-adaptors. Some self-adaptors manifest internally, such as coughs or throat-clearing sounds. Other people play with dry-erase markers, their note cards, the change in their pockets, or the lectern while speaking. The use of object adaptors can also signal boredom as people play with the straw in their drink or peel the label off a bottle of beer. Smartphones have become standard object adaptors, as people can fiddle with their phones to help ease anxiety.

Emblems are gestures with a specific agreed-upon meaning often bound by culture. These are different from the signs used by hearing-impaired people or others who communicate using sign language: even though they have a generally agreed-upon meaning, they are not part of a formal sign system such as American Sign Language that is explicitly taught to a group of people. A hitchhiker's raised thumb, the "OK" sign with thumb and index finger connected in a circle with the other three fingers sticking up, and the raised middle finger are all examples of emblems with an agreed-upon meaning or meanings within a culture. Emblems can be still or in motion; for example, rolling your hands over and over in front of you says, "Move on."



Figure 4.2.1 Emblems are gestures that have a specific meaning. In Canada, a thumbs-up can mean "I need a ride" or "OK!".

Just as we can trace the history of a word or its etymology, we can also trace some nonverbal signals, especially emblems, to their origins. Holding up the index and middle fingers in a "V" shape with the palm facing in is an insulting gesture in Britain that means "up yours." This gesture dates back centuries to when the primary weapon of war was the bow and arrow. When archers were captured, their enemies often cut off these two fingers, which was seen as the ultimate insult and worse than being executed since the archer could no longer shoot his bow and arrow. So holding up the two fingers was a provoking gesture used by archers to show their enemies that they still had their shooting fingers (Pease & Pease, 2004, p. 121).

Illustrators use the most common gestures to illustrate the verbal message they accompany but cannot stand independently (Adler et al., 2021). For example, you might use hand gestures to indicate the size or shape of an object. Unlike emblems, illustrators do not typically have meaning and are used more subconsciously than emblems. These largely involuntary and seemingly natural gestures flow from us as we speak but vary in intensity and frequency based on context. Although we are never explicitly taught how to use illustrative gestures, we do it automatically. Think about how you gesture when having an animated conversation on the phone even though the other person can not see you, or how you verbally give instructions and

directions to a client, but as you do so, you use your arms and fingers to point (Adler et al., 2021).

Head Movements, Posture, and Positioning

Head movements and posture are grouped because both are often used to acknowledge others and communicate interest or attentiveness. Regarding **head movements,** a head nod is a universal sign of acknowledgment in cultures where the formal bow is no longer used as a greeting. In these cases, the head nod essentially serves as an abbreviated bow. An innate and universal head movement is the headshake back and forth to signal "no." This nonverbal signal begins at birth, even before a baby knows it has a corresponding meaning. Babies shake their heads side to side to reject their mother's breast and later reject attempts to spoon-feed (Pease & Pease, 2004, p. 232). This biologically based movement then sticks with us to become a recognizable signal for "no." We also move our heads to indicate interest. For example, a head-up typically indicates an engaged or neutral attitude, a head tilt indicates interest and is an innate submission gesture that exposes the neck and subconsciously makes people feel more trusting of us, and a head down signals a hostile or aggressive attitude (Pease & Pease, 2004, p. 233).

There are four general human **postures**: standing, sitting, squatting, and lying down (Hargie, 2011). Each posture has many variations, and when combined with particular gestures or other nonverbal cues, they can express many different meanings. Most of our communication occurs while we are standing or sitting. One interesting standing posture involves putting our hands on our hips and is a nonverbal cue that we use subconsciously to make us look bigger and show assertiveness. When the elbows are pointed out, this prevents others from getting past us quickly and is a sign of attempted dominance or a gesture that says we are ready for action. While sitting, leaning back shows informality and indifference, straddling a chair is a sign of dominance (but also some insecurity because the person is protecting the vulnerable front part of their body), and leaning forward shows interest and attentiveness (Pease & Pease, 2004).

Nonverbal communication can help communicate emotions such as empathy, compassion, and acceptance. It is often how health care providers respond rather than what they say that leaves a lasting impression on clients, so it is essential to be

aware of how you communicate using nonverbal behaviours. Nonverbal behaviours must align with your verbal behaviours so clients understand what you are saying clearly. For example, it would be confusing for the client if you had a sombre tone of voice, a distancing posture, and avoided eye contact while attempting to maintain a therapeutic relationship with the client. Try to ensure positioning where you are both at the same vertical level and at a slight angle toward one another. This positioning conveys an open and non-confrontational, and nonauthoritative space. Avoid standing over the client if they are sitting or lying in bed whenever possible. It is better to sit down, which also conveys that you have time to listen to them. There are many models to inform your nonverbal communication. One helpful model is Stickley's **SURETY model** (2011), which stands for:

S- Sit at an angle to the client. This is a non-confrontational position. Please remember that each client has their definition of personal space, so watch for signs of discomfort and respond accordingly. **U**– Uncross legs and arms. Crossing our legs and arms may communicate defensiveness or disinterest in what a client says. Deliberately uncrossing our legs and arms communicates that we are open to hearing what the client says. We must be careful that this position does not lead to slouching as this position is too open within a professional environment. **R- Relax.** This position may take some practice to become comfortable. A health professional needs to become comfortable listening in this position. **E- Eye contact.** Appropriate eye contact can be a powerful way of communicating with a client. It demonstrates respect, presence and active listening. Appropriate eye contact occasionally breaks, thus ensuring a health professional does not stare at a client, which can be perceived as threatening, intrusive and intimidating. Appropriate eye contact is not universal, and we must consider the influence of age, gender, culture and medical or abuse history. **T- Touch**. Appropriate use of touch is not universal. We must be sensitive to touch (purpose) while considering context and the influence of age, gender, culture, and client history. Using touch respectfully conveys caring, empathy and understanding. Touch can also be considered abusive when misused. Health professionals use touch when conducting assessments, transferring patients, and during bedside treatments and procedures. The therapeutic use of touch is not straightforward and should be guided by professional organizations' standards of practice and institutional or business policies. **Y- Your** intuition. Health professionals gain confidence with practice and should begin to trust their

intuition. One's use of intuition is dependent on their culture, belief, and personal and professional lived experiences.

Body Language

Body language affects how others see us but may also change how we see ourselves. The following video explains how Social psychologist Amy Cuddy, views **"power posing"** — standing in a posture of confidence, even when we do not feel confident — can affect testosterone and cortisol levels in the brain and might even impact our chances for success.

Watch: Amy Cuddy: Your body language may shape who you are



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=121#oembed-1

Video Transcript (see Appendix B 4.2)

Eye Contact

We also communicate through **eye behaviours**, primarily eye contact. While eye behaviours are often studied under the category of kinesics, there is a specific branch of nonverbal studies called oculesics, which comes from the Latin word *oculus*, meaning "eye." The face and eyes are the main points of focus during communication, and along with our ears, our eyes take in most of the communicative information around us. The saying "The eyes are the window to the soul" is accurate in terms of where people typically think others are "located," which is right behind the eyes (Andersen, 1999). Certain eye behaviours have become tied to personality traits or emotional states, as illustrated in phrases like "hungry eyes," "the evil eye," and "bedroom eyes."

Eye contact serves several communicative functions, from regulating interaction to monitoring interaction, conveying information, and establishing interpersonal connections. Regarding regulating communication, we use eye contact to signal to others that we are ready to speak or cue others to speak. We have all been in that awkward situation where we are asked a question, no one else responds, and the speaker looks directly at us as if to say, "What do you think?" In that case, eye contact is used to cue us to respond. During an interaction, eye contact changes as we shift from speaker to listener. Canadians typically shift eye contact while speaking — looking away from the listener and then looking back at their face every few seconds. Toward the end of our speaking turn, we make more direct eye contact with our listener to indicate that we are finishing up. While listening, we tend to make more sustained eye contact, not glancing away as regularly as we do while speaking (Martin & Nakayama, 2010, p. 276).

Aside from regulating conversations, eye contact is also used to monitor interaction by taking in feedback and other nonverbal cues and sending information. Our eyes bring in the visual information we need to interpret people's movements, gestures, and eye contact. Speakers can use eye contact to determine whether an audience is engaged, confused, or bored and then adapt their message accordingly. Our eyes also send information to others. People know not to interrupt when thinking deeply because we naturally look away from others when processing information. Making eye contact with others also communicates that we are paying attention and are interested in what another person is saying. Eye contact is a crucial part of active listening.

Eye contact can also be used to intimidate others. Depending on the region of the world, there are social norms about how much eye contact we make with people, and those norms vary depending on the setting and the person. Staring at another person in some contexts could communicate intimidation, while in others, it could communicate flirtation. As we learned, eye contact is a crucial immediacy behaviour, and it signals to others that we are available for communication. Once communication begins (if it does), eye contact helps establish rapport or connection. We can also use our eye contact to signal that we do not want to make a connection with others. For example, in a public setting such as an airport or a gym where people often make small talk, we can avoid making eye contact to indicate that we do not want to talk with strangers. Another person could use eye contact to try to coax you into speaking. For example, when one person continues

to stare at another person who is not reciprocating eye contact, the person avoiding eye contact might eventually give in, become curious, or become irritated and say, "Can I help you with something?" Eye contact sends and receives essential communicative messages that help us interpret others' behaviours, convey information about our thoughts and feelings, and facilitate or impede rapport or connection. This list reviews the specific functions of eye contact:

- regulate interaction and provide turn-taking signals
- monitor communication by receiving nonverbal communication from others
- signal cognitive activity (we look away when processing information)
- express engagement (we show people we are listening with our eyes)
- convey intimidation
- express flirtation
- establish rapport or connection

Facial Expressions

Our faces are the most expressive part of our bodies. Think of how photos are often intended to capture a particular expression "in a flash" to preserve for later viewing. Even though a photo is a snapshot in time, we can still interpret much meaning from a human face caught in a moment of expression. Basic facial expressions are recognizable by humans worldwide. Much research has supported the universality of a **core group of facial expressions: happiness, sadness, fear, anger, and disgust**. The first four are especially identifiable across cultures (Andersen, 1999). However, the triggers for these expressions and the cultural and social norms that influence their displays are culturally diverse. If you have spent much time with babies, you know they can express all these emotions. Seeing the pure and innate expressions of joy and surprise on a baby's face makes playing peek-a-boo entertaining for adults. As we get older, we learn to follow display rules for facial expressions and other signals of emotion and to control our emotional expression better based on our culture's norms.

Smiles are powerful communicative signals and are a vital immediacy behaviour. Although facial expressions are typically viewed as innate, and several are universally recognizable, they are not always connected to an emotional or internal

biological stimulus; they can serve a more social purpose. For example, most of our smiles are primarily made for others and are not simply an involuntary reflection of an internal emotional state (Andersen, 1999). However, these social smiles are slightly but perceptibly different from more genuine ones. People generally perceive smiles as more genuine when the other person smiles "with their eyes." This type of smile is difficult to fake because the muscles around the eye activated when we spontaneously or genuinely smile are not under our voluntary control. These muscles' involuntary and spontaneous contraction moves the skin around our cheeks, eyes, and nose to create a smile distinct from a fake or polite smile (Evans, 2001, p. 107). People can distinguish the difference between these, which is why photographers often engage in cheesy joking with adults or use props with children to induce a genuine smile before they snap a picture.

Facial expressions help set the emotional tone when speaking in front of others. To set a positive tone before speaking, briefly look at the audience and smile to communicate friendliness, openness, and confidence. Beyond opening and welcoming facial expressions, facial expressions communicate a range of emotions and can infer personality traits and make judgments about a speaker's credibility and competence. Facial expressions can communicate that a person is tired, excited, angry, confused, frustrated, sad, confident, smug, shy, or bored. For example, a face with little animation may make a patient or client think you are bored with what they say. It is also essential that facial expressions match what is being said. A smile, bright eyes, and slightly raised eyebrows will nonverbally enhance the verbal message when delivering something light-hearted or humorous. When delivering something severe or sombre, a furrowed brow, a tighter mouth, and even a slight head nod can enhance that message. If your facial expressions and speech content are inconsistent, the mixed messages could confuse clients and families, leading them to question your credibility.

Haptics

Think about how touch can comfort someone in a moment of sorrow when words alone cannot. This positive power of touch is countered by the potential for touch to be threatening, such as when it is connected to violence. To learn about the power of touch, we turn to **haptics**, which refers to the study of communication

by touch (Hannaford & Okamura, 2016). People probably get more explicit advice and instruction on using touch than other nonverbal communication. A lack of nonverbal communication competence related to touch could have negative interpersonal consequences; for example, if we do not follow the advice we have been given about the importance of a firm handshake, a person might make negative judgments about our confidence or credibility. A lack of competence could have more dire negative consequences, including legal punishment if we touch someone inappropriately (intentionally or unintentionally). Touch is necessary for social development and can be welcoming, threatening, or persuasive.

There are several types of touch, including functional-professional, social-polite, friendship-warmth and love-intimacy (Heslin & Apler, 1983). At the functional-professional level, touch is related to a goal or part of a routine professional interaction, which makes it less threatening and more expected. For example, we let barbers, hairstylists, doctors, nurses, tattoo artists, and security screeners touch us in ways that would otherwise be seen as intimate or inappropriate if not in a professional context. At the socially–polite level, socially sanctioned touching behaviours help initiate interactions and show that others are included and respected. A handshake, a pat on the arm, and a pat on the shoulder are examples of social–-polite touching. A handshake is an abbreviated hand-holding gesture. Still, we know prolonged handholding would be considered too intimate and inappropriate at the functional–professional or social–polite level. Though touch still has interpersonal implications at the functional–professional, and social–polite levels. The touch between health professional and client, although professional and not intimate, has the potential to be therapeutic and comforting. In addition, a socially–polite touch exchange plays into initial impression formation, which can have important implications for how an interaction and a relationship unfold.

The need for human touch is universal in healthcare environments and is essential to the health professional–client relationship. However, multiple barriers to human touch exist in the healthcare environment. With little research to guide practice, we argue for the importance of the human touch in providing holistic care (Nist et al., 2020).

Vocalics

We learned earlier that *paralanguage* refers to a message's vocalized but nonverbal parts. **Vocalics** is the study of paralanguage, including the vocal qualities accompanying verbal messages, such as pitch, volume and intensity, rate, vocal quality, and verbal fillers (Andersen, 1999).

Pitch

Pitch helps convey meaning, regulate conversational flow, and communicate the intensity of a message. Even babies recognize a sentence with a higher-pitched ending as a question. We also learn that greetings have a rising emphasis and farewells have a falling emphasis. Of course, no one explains these things explicitly; we learn them through observation and practice. We do not pick up on some of the more subtle and complex patterns of paralanguage involving pitch until we are older. Children, for example, have difficulty perceiving sarcasm, usually conveyed through paralinguistic characteristics such as pitch and tone rather than spoken words.

Volume and Intensity

Volume or intensity refers to how loudly or softly an individual speaks. Intensity can be tied to emotion. When individuals speak loudly, the increased volume may convey anger, emotional distress, happiness, or heightened excitement. We typically adjust our volume based on our setting, the distance between people, and the relationship. In our age of computer-mediated communication, TYPING IN ALL CAPS is usually seen as offensive, as it is equated with yelling. When individuals speak at a lower volume, the decreased volume may be an effort to diffuse an emotionally intense conversation. Lower volume could also be the result of sharing bad news, discussing taboo or sensitive topics (i.e., when people whisper "she's pregnant" or "he died"), or conveying private information.

Rate

Speaking rate refers to how fast or slow a person speaks and can lead others to form impressions about our emotional state, credibility, and intelligence. As with volume, variations in speaking rate can interfere with the ability of others to receive and understand verbal messages. A slow speaker could bore others and cause their attention to wander. A fast speaker may be challenging to follow, and the fast delivery can distract from the message. When speaking at a faster-than-normal rate, it is essential that a speaker also clearly articulate and pronounce their words. A higher speech rate and a pleasant tone of voice can also benefit compliance gaining and aid in persuasion. Professionals must adapt their speech rate to the client's needs in healthcare environments. A voice at a low volume or a whisper can be very appropriate when sending a covert message. Still, it would not enhance a person's credibility if used in a professional communication context.

Tone

Our **tone of voice** can be controlled somewhat with pitch, volume, and emphasis, but each voice has a distinct quality known as a vocal signature. Voices vary in terms of resonance, pitch, and tone. Pitch is not generally thought about much unless an individual's pitch stands out: a pitch at a higher or lower end of a range will be noticed if there is a momentary or situational change. For example, when children become excited or scared, they may be described as "squealing." The situation will determine whether squealing children are thought to be excited or scared.

Verbal Fillers

Verbal fillers are sounds that fill gaps in our speech as we think about what to say next. They are considered a part of nonverbal communication because they are not like typical words that stand in for a specific meaning or meaning. Verbal fillers such as "um," "uh," "like," and "ah" are common in regular conversation and are not typically disruptive. Using verbal fillers can help a person "keep the floor" during a conversation if they need to pause for a moment before continuing verbal communication. Still, for healthcare professionals, verbal fillers may communicate insecurity and a lack of confidence.

Pauses and silences are also important in creating meaning during the interaction. Pauses draw attention to important parts of messages. The "pregnant pause" is an extra-long pause that precedes particularly weighty information. Pauses are brief, but prolonged silence, such as minutes, hours, or even days, can also be used to convey meaning. Consider a professional conversation in which the client does not respond to you. What meaning is conveyed? Is the individual thinking? Is the individual hurt, angry, or too shocked to speak?

Proxemics

Proxemics refers to the study of how space and distance influence communication. We only need to look at how space is used in common metaphors to see that space, communication, and relationships are closely related. For example, when we are content with and attracted to someone, we say we are "close" to them. When we lose connection with someone, we may say they are "distant." In general, space influences how people communicate and behave. Smaller spaces with a high density of people often lead to breaches of our personal space. Suppose this is a setting in which this type of density is expected beforehand, such as at a crowded concert or on a train during rush hour. In that case, we make various communicative adjustments to manage the space issue. Unexpected breaches of personal space can lead to adverse reactions, especially if we feel someone has violated our space voluntarily, meaning that a crowding situation did not force them into our space. Additionally, research has shown that crowding can lead to criminal or delinquent behaviour, known as a "mob mentality" (Andersen, 1999). To better understand how proxemics function in nonverbal communication, we will more closely examine the proxemic distances associated with personal space and the concept of territoriality.

Proxemic Distances

We all have varying definitions of our "personal space"; these definitions are contextual and depend on the situation and the relationship. Although our "bubbles" are invisible, people are socialized into the norms of personal space within

their cultural group. Hall (1968) identified four zones: public, social, personal, and intimate distance. The zones are more elliptical than circular, taking up more space in front of us, where our line of sight is than at our side or back, where we cannot monitor what people are doing. The figures below show how these zones relate to each other and the individual. Even within a particular zone, interactions may differ depending on whether someone is in the outer or inner part of the zone.

Public Space (3 Metres/12 feet+ or More)

Public space starts about three and a half metres (twelve feet) from a person and extends from there.

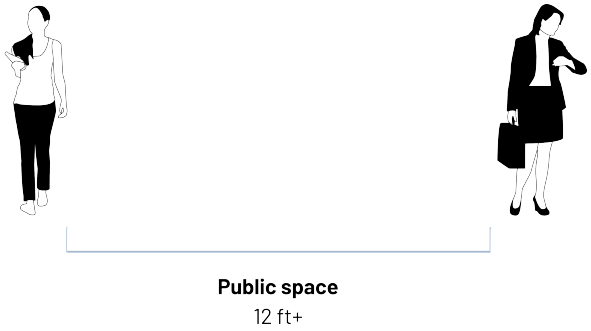


Figure 4.2.2 Public space.

This is the **least personal of the four spaces** and would typically be used when a person is engaging in a formal speech or when a high-profile or influential person such as a celebrity or executive maintains such a distance as a sign of power or for safety and security reasons. Regarding regular interaction, we are often not obligated or expected to acknowledge or interact with people who enter our public zone. It would be challenging to have a deep conversation with someone at this level because one would have to speak loudly, and there is no physical closeness that is often needed to promote emotional closeness or establish rapport.

Social Space (1–3 Metres/4-12 feet)



Figure 4.2.3 Social space.

Communication in the **social space** is one to three metres (about four to twelve feet) away from our body, is typical in professional or casual interactions but is neither intimate nor public. This distance is preferred in many professional settings. It is possible to have people in the outer portion of this social zone but not feel obligated to interact with them. Still, when people come closer than two metres to us, we often feel obligated to at least acknowledge their presence.

Personal Space (1.5 meters/0-4 feet or Less)

Personal and intimate space start at our physical body and extend about a metre (three to four feet).

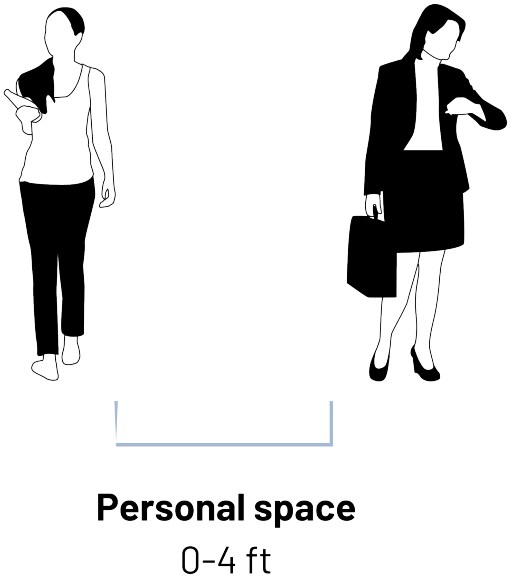


Figure 4.2.4 Personal space.

Much of our communication occurs in the personal zone, which we typically consider our "personal space bubble," and extends from less than a metre to a little more than a metre (one-and-a-half feet to four feet) away from our body. Even though we are getting closer to the physical body of another person, we may use verbal communication at this point to signal that our presence in this zone is friendly and not intimate. Even people who know each other well could be uncomfortable unnecessarily spending too much time in this zone. This zone is broken into two subzones, which helps us negotiate close interactions with people we may not be close to interpersonally (McKay et al., 1995, p. 59). The outer-personal zone extends from nearly a metre to

slightly more than a metre away (tow-and-a-half feet to four feet). It is helpful for conversations that need to be private but between people who are not interpersonally close. This zone allows for intimate communication but does not convey the intimacy that a closer distance would, which can be beneficial in professional settings. The inner-personal zone extends less than a metre (one-and-a-half to two-and-a-half feet). It is a space reserved for communicating with people we are interpersonally close, trying to get to know, or with health professionals. In this subzone, we can easily touch the other person as we talk to them, briefly placing a hand on his or her arm or engaging in another light social touching that facilitates conversation, empathy, self-disclosure, and feelings of closeness.

Intimate Space (Less than 1 Metre/0-1.5 feet)



Figure 4.2.5 Intimate space.

As we breach the invisible line that is a metre or less (one-and-a-half feet) from our body, we enter the **intimate space,** reserved for only the closest friends, family, romantic or intimate partners, and some health professionals. It is impossible to completely ignore people when they are in this space, even if we are trying to pretend that we are ignoring them. A breach of this space can be comforting in some contexts and annoying or frightening in others. We need regular human contact that is not just verbal but also physical. We have already discussed the importance of touch in nonverbal communication, and for that much-needed touch to occur, people must enter our intimate space. Being close to someone and feeling their physical presence can be very comforting when words fail. There are also social norms regarding the amount of this type of closeness that can be displayed in public, as some people become uncomfortable even seeing others interacting in the intimate zone. While some people are comfortable engaging in or watching others in PDAs (public displays of affection), others are not.

So what happens when our space is violated? Although these zones are well established in research regarding the personal space preferences of Canadians (McKay et al., 1995), individuals vary in terms of their reactions to others entering

certain zones, and determining what constitutes a "violation" of space is subjective and contextual. For example, another person's presence in our social or public zones does not typically arouse suspicion or adverse physical or communicative reactions, though it might in some situations or with certain people. However, many situations lead to our personal and intimate space being breached by others against our will. These breaches are more likely to be upsetting, even when expected. We have all had to get into a crowded elevator or wait in a long line. In such situations, we may rely on some verbal communication to reduce immediacy and indicate that we are not interested in closeness and are aware that a breach has occurred. People may comment about the crowd, such as, "We are packed in here like sardines," or use humour to indicate that they are pleasant, well-adjusted, and uncomfortable with the breach like any "normal" person would be. Interestingly, as we will learn in our discussion of territoriality, we do not often use verbal communication to defend our personal space during regular interactions. Instead, we rely on more nonverbal communication, such as moving, crossing our arms, or avoiding eye contact to deal with space breaches. It is also essential to be aware of your professional practice standards and what is considered professional and unprofessional conduct. Take the time to locate and review practice standards applicable to your profession.

Territoriality

Territoriality is an innate drive to take up and defend spaces. This drive is shared by many creatures and entities, ranging from packs of animals to individual humans to nations. Whether it is a neighbourhood claimed by a particular salesperson, your preferred place to sit in a restaurant, your usual desk in the classroom, or the seat you have marked to save while getting concessions at a sporting event, we claim specific spaces as our own. Territory has three main divisions: primary, secondary, and public (Hargie, 2011, p. 70). Sometimes our claim to a space is official. These spaces are our **primary territories** because they are marked or understood as exclusively ours and under our control. A person's house, yard, room, desk, side of the bed, or shelf in the medicine cabinet could be considered primary territory.

Secondary territories do not belong to us and are not exclusively under our control. Still, they are associated with us, which may lead us to assume that the space will be

open and available to us when we need it without taking further steps to reserve it. This happens in classrooms regularly. Students often sit at the same desk or at least the same general area as they did on the first day of class.

Public territories are open to all people. People can mark public territory and use it for a limited period, but space is often up for grabs, making it challenging for some people to manage and can lead to conflict. To avoid this situation, people use a variety of objects typically recognized by others as nonverbal cues that mark a place as temporarily reserved — for example, jackets, bags, papers, or a drink.

Chronemics

Chronemics refers to the study of how time affects communication. Time can be classified into several categories, including biological, personal, physical, and cultural (Andersen, 1999). Biological time refers to the rhythms of living things. Humans follow a circadian rhythm, meaning that we are on a daily cycle that influences eating, sleeping, and waking. Our physical and mental health, communication competence, and personal relationships can suffer when our natural rhythms are disturbed, such as by all-nighters or jet lag. Keep biological time in mind as you communicate with others. Remember that early morning conversation and speeches may require more preparation to be awake enough to communicate well. A more patient or energetic delivery may be needed to accommodate others who are still warming up for their day.

Personal time refers to how individuals experience time (Bruneau, 2011). How we experience time varies based on our mood, interest level, and other factors. Think about how quickly time passes when you are interested in and therefore engaged in something. We have been in 80-minute classes that seemed to drag on forever and three-hour classes that zipped by. Individuals also vary based on whether or not they are future- or past-oriented. People with past-time orientations may want to reminisce, reunite with old friends, and spend considerable time preserving memories and keepsakes in scrapbooks and photo albums. People with future-time orientations may spend the same time making career and personal plans, writing to-do lists or researching future vacations, potential retirement spots, or the book they plan to read next.

Physical time refers to the fixed cycles of days, years, and seasons. Physical time, especially seasons, can affect our mood and psychological states. Some people experience seasonal affective disorder that leads them to experience emotional distress and anxiety during the changes of seasons, primarily from warm and bright to dark and cold (summer to fall and winter).

Cultural time refers to how a large group of people views time. Polychronic people do not view time as a linear progression that needs to be divided into small units and scheduled in advance. Polychronic people keep more flexible schedules and may engage in several activities simultaneously. Monochronic people schedule their time more rigidly and do one thing at a time. A polychronic or monochronic orientation to time influences our social realities and interactions with others.

Additionally, how we use time depends in some ways on our status. For example, doctors can make their patients wait for extended periods, and executives and celebrities may be consistently behind schedule, making others wait for them. Promptness and the amount of socially acceptable time for lateness and waiting varies among individuals and contexts. Chronemics also includes the amount of time we spend talking.

Personal Presentation and Environment

Personal presentation involves our physical characteristics and the artifacts we adorn and surround ourselves with. Physical characteristics include body shape, height, weight, attractiveness, and other physical features. We do not have as much control over how these nonverbal cues are encoded as we do with many other aspects of nonverbal communication. These characteristics play a significant role in initial impression formation, even though we know we "should not judge a book by its cover." Although ideals of attractiveness vary among cultures and individuals, research consistently indicates that people deemed attractive based on physical characteristics have distinct advantages in many aspects of life. This fact and media images often project unrealistic beauty ideals, contributing to booming health and beauty, dieting, gym, and plastic surgery industries.

Have you ever tried to change your conscious "look?" Simple clothing changes

can impact how people are perceived. Aside from clothes, jewelry, visible body art, hairstyles, and other political, social, and cultural symbols send messages to others about who we are. Body piercings and tattoos have shifted from subcultures to the mainstream over the past few decades. The physical location, size, and several tattoos and piercings play a significant role in whether or not they are appropriate for professional contexts. Many people with tattoos or piercings make conscious choices about when and where they display their body art. Hair also sends messages, whether it is on our heads or our bodies. Men with short hair are generally considered more conservative than men with long hair, but men with shaved heads may be seen as aggressive. Whether a person has a part in their hair, a mohawk, faux-hawk, ponytail, curls, or bright pink hair also sends nonverbal signals to others.

Jewelry can also send messages with varying degrees of direct meaning. In North America, a ring on the "ring finger" of a person's left hand typically indicates that they are married or in an otherwise committed relationship; a thumb ring or a right-hand ring on the "ring finger" does not send such a direct message. People also adorn their clothes, body, or belongings with religious or cultural symbols, such as a cross to indicate a person's Christian faith or a rainbow flag to indicate that a person is gay, lesbian, bisexual, transgender, queer, or an ally to one or more of these groups.



Figure 4.2.6. The objects surrounding us send nonverbal cues that may influence how people perceive us. What impression does a messy, crowded office make?

Lastly, the **environment** in which we interact affects our verbal and nonverbal communication because we can often manipulate the environment, similar to how we would manipulate our gestures or tone of voice to suit our communicative needs. The books we display on our coffee table, the magazines a doctor keeps in their waiting room, the placement of fresh flowers in a foyer, or a piece of mint chocolate on a hotel bed pillow all send particular messages and can be easily changed. Placing objects and furniture in a physical space can help create a formal, distant, friendly, or intimate climate. In formality, we can use nonverbal communication to convey dominance and status, which helps define and negotiate power and roles within relationships. A room with soft lighting, a small fountain that creates the ambient sound of water flowing, and a comfortable chair can help facilitate interactions between a therapist and a client. In summary, whether we know it or not, our physical characteristics and artifacts communicate messages with the world around us.

View the two videos below, and refer to the questions that follow.

Watch: Clinical communication skills



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=121#oembed-2

Video Transcript (see Appendix B 4.2.1)



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=121#oembed-3

Video Transcript (see Appendix B 4.2.2)

1. What are some differences in nonverbal communication you observed while watching the videos? What nonverbal communication skills could you utilize in your professional interactions?

2. Have you experienced a similar interaction? How did it make you feel? What could have been done differently if you could experience it again?

Key Takeaways

- *Kinesics* refers to body movements and posture and includes the following components:
    - Gestures are arm and hand movements and include adaptors such as clicking a pen or scratching your face, emblems such as a thumbs-up to say "OK," and illustrators such as bouncing your hand along with the rhythm of your speech.
    - Head movements and posture include the orientation of movements of our head, the orientation and positioning of our body, and the various meanings this sends. Head movements such as nodding indicate agreement, disagreement, and interest, among other things. Posture can indicate assertiveness, defensiveness, interest, readiness, or intimidation, among other things.
    - Eye contact is studied under the category of oculesics and refers explicitly to eye contact with another person's face, head, and eyes, and the patterns of looking away and back at the other person during the interaction. Eye contact provides turn-taking signals, indicates that we are engaged in cognitive activity, and helps establish rapport and connection, among other things.
    - Facial expressions refer to using the forehead, brow, and facial muscles around the nose and mouth to convey meaning. Facial expressions can convey happiness, sadness, fear, anger, and other emotions.
- *Haptics* refers to touch behaviours that convey meaning during interactions. Touch operates at many levels, including functional–professional, social–polite, friendship–warmth, and love–intimacy.
- *Vocalics* refers to the vocalized but not verbal aspects of nonverbal communication, including our speaking rate, pitch, volume, tone of voice, and vocal quality. These qualities reinforce the meaning of verbal communication, allow us to emphasize particular parts of a message, or can contradict verbal messages.
- *Proxemics* refers to the use of space and distance within communication. North Americans, in general, have four spaces that constitute our personal space: public space (3-4 metres/12 feet or more from our body), social space (around 1 to 4 metres/4–12 feet from our body), personal space (half a metre to a metre/1.5–4 feet from our body), and intimate space (from body contact to half a metre/1.5 feet away). Proxemics also studies territoriality, or how people take up and defend personal space.
- *Chronemics* refers to the study of how time affects communication. It includes how different time cycles affect our communication, including differences between past- or future-oriented people and cultural perspectives on time as fixed and measured (monochronic) or fluid and adaptable

(polychronic).

- *Personal presentation and environment* refer to how the objects we adorn ourselves and our surroundings (*artifacts)* provide nonverbal cues from which others make meaning and how our physical environment — for example, the layout of a room and seating positions and arrangements — influences communication.

Exercises

1. Provide examples of how eye contact plays a role in your daily communication.
2. The Covid-19 pandemic has created new challenges regarding the use of therapeutic touch. What types of touch might be present or used within healthcare environments? How have social distancing and infection control practices impacted therapeutic touch within healthcare environments? What are your feelings about therapeutic touch? What are your feelings about social distancing? How might these feelings affect your interactions with others within a healthcare environment?
3. How do you think wearing COVID-19 PPE (personal protective equipment) might impact your ability to recognize nonverbal cues within your professional role? How might it impact your client's or their family's ability to recognize your nonverbal cues?
4. Many people do not consider time an essential part of our nonverbal communication. Consider an example of how chronemics sends nonverbal messages in academic, professional, and personal settings.

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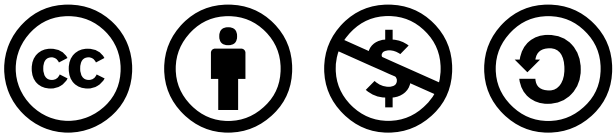
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4.3 Nonverbal Communication Competence

Learning Objectives

- Identify strategies for improving competence at sending nonverbal messages.
- Identify strategies for improving competence at interpreting nonverbal messages.
- Explain the connection between deception and nonverbal communication competence.

As we age, we internalize social and cultural norms related to sending (encoding) and interpreting (decoding) nonverbal communication. In terms of sending, the tendency of children to send unmonitored nonverbal signals reduces as they age and begin to monitor and perhaps censor or mask them (Andersen, 1999). Likewise, as we become more experienced communicators, we think we have become better at interpreting nonverbal messages. In this section, we will discuss some strategies for effectively encoding and decoding nonverbal messages. As we have already learned, we receive little official instruction in nonverbal communication. Still, you can think of this chapter as a training manual to help improve your nonverbal communication competence. As with all aspects of communication, improving your nonverbal communication takes commitment and continued effort. Additionally, once the initial effort is put into improving your nonverbal encoding and decoding skills and those new skills are implemented, you will be encouraged by positive reactions from others. Remember that people enjoy interacting with others skilled at nonverbal encoding and decoding, which will be evident in their reactions, providing further motivation and encouragement to hone your skills.

Guidelines for Sending Nonverbal Messages

First impressions matter. Nonverbal cues account for much of the content from which we form initial impressions, so it is important to know that people make judgments about our identities and skills after only brief exposure. Our competence regarding and awareness of nonverbal communication can help determine how an interaction will proceed and whether it will occur. People skilled at encoding nonverbal messages are more favourably evaluated after initial encounters. This is likely because people who are more nonverbally expressive are more attention-getting and engaging and make people feel more welcome and warm due to increased immediacy behaviours, all of which enhance perceptions of charisma. Understanding the following concepts will aid in your communication competence.

Nonverbal Communication Is Multichannel

Be aware of the multichannel nature of nonverbal communication. We rarely send a nonverbal message in isolation. For example, a posture may be combined with a touch or eye behaviour to create a nonverbal cluster (Pease & Pease, 2017). Nonverbal congruence refers to consistency among different nonverbal expressions within a cluster. Congruent nonverbal communication is more credible and effective than ambiguous or conflicting nonverbal cues. Even though you may intend your nonverbal messages to be congruent, they could still be decoded in a way that does not match your intent, especially since nonverbal expressions vary in their degree of conscious encoding. In this sense, the multichannel nature of nonverbal communication creates the potential for decreased credibility and ambiguity.

When we become more aware of our messages, we can monitor for nonverbal signals that are incongruent with other messages or may be perceived as such. Suppose a healthcare professional is talking to a patient about their feelings. In that case, they may lean forward and nod, encoding a combination of body orientation and a head movement that conveys attention. Suppose the health care professional regularly breaks off eye contact and looks anxiously at the door. In that case, the message being sent could be perceived as disinterest, which is incongruent with the overall message of care and concern they probably want to encode. This may

also occur in reading the nonverbal communication of a patient. Increasing awareness of the multiple channels through which we send nonverbal cues can help us make our signals more congruent.

Nonverbal Communication Affects Our Interactions

Nonverbal communication affects our own and others' behaviours and communication. Changing our nonverbal signals can affect our thoughts and emotions. Knowing this gives us more control over our communication trajectory, possibly allowing us to intervene in a negative cycle. For example, suppose you are waiting to check in to see your doctor. If the wait time is very long, and the man in front of you does not have his materials organized and is asking unnecessary questions, you might start to exhibit nonverbal clusters that signal frustration. You might cross your arms, a closing-off gesture, and combine that with wrapping your fingers tightly around one bicep and occasionally squeezing, a self-touch adaptor resulting from anxiety and stress. The longer you stand like that, the more frustrated and defensive you will become because that nonverbal cluster reinforces and heightens your feelings. Increased awareness about these cycles can help you make conscious moves to change your nonverbal communication and, subsequently, your cognitive and emotional states (McKay et al., 1995, p. 54).

Nonverbal Communication Creates Rapport

Humans have evolved an innate urge to mirror each other's nonverbal behaviour, and although we are not often aware of it, this urge influences our behaviour daily (Pease & Pease, 2017). Think, for example, about how people "fall into formation" when waiting in line. Our nonverbal communication works to create unspoken and subconscious cooperation as people move and behave in similar ways. When one person leans to the left, the next person in line may also lean to the left, and this shift in posture may continue down the line to the end until someone else makes another movement, and the whole line shifts again. This phenomenon is known as mirroring, which refers to the often-subconscious practice of using nonverbal cues to match those around us. Mirroring sends implicit messages to others that say, "Look! I am just like you." Mirroring evolved as an essential social function, allowing

early humans to fit in with larger groups more easily. Logically, early humans who were more successful at mirroring were more likely to secure food, shelter, and security and passed that genetic disposition down to us.

Nonverbal Communication Regulates Conversations

Encoding appropriate turn-taking signals can help us hold the floor when needed or work our way into a conversation smoothly without inappropriately interrupting someone or being seen as rude. People with nonverbal encoding competence are typically more "in control" of conversations. This regulating function can be useful in initial encounters when we are trying to learn more about another person and in situations where status differentials are present or compliance gaining or dominance are goals. Interrupting is generally considered rude and should be avoided, although there can sometimes be an exception for close friends, family, and relational partners. Even though verbal communication is often used to interrupt another person, interruptions are studied chronologically because they interfere with another person's talk time. Instead of interrupting, you can use nonverbal signals like leaning in, increasing your eye contact, or using a brief gesture such as subtly raising one hand or the index finger to signal to another person that you'd like to take the floor soon.

Nonverbal Communication Relates to Listening

Part of being a good listener involves nonverbal-encoding competence because nonverbal feedback such as head nods, eye contact and posture can signal that a listener is paying attention and that the speaker's message is received and understood. Active listening, for example, combines good cognitive listening practices with outwardly visible cues that signal to others that we are listening. We all know from experience which nonverbal signals convey attentiveness and which convey a lack of attentiveness. Listeners should avoid distracting movements in the form of self, other, and object adaptors. Being a higher self-monitor can help you catch nonverbal signals that might signal that you are not listening, at which point you could consciously switch to more active listening signals.

Increase Your Competence in Specific Channels of Nonverbal Communication

While it is important to recognize that we send nonverbal signals through multiple channels simultaneously, we can also increase our nonverbal communication competence by becoming more aware of how it operates in specific channels. Although no one can truly offer you a rulebook on effectively sending every type of nonverbal signal, several nonverbal guidebooks are written from more anecdotal and less academic perspectives. While these books vary tremendously in credibility and quality, some, like Pease and Pease's *The Definitive Book of Body Language* (2017), are informative and interesting to read.

In the previous section, we covered a number of concepts pertaining to nonverbal communication. In the section below, **strategies for application are presented**.

Kinesics

The following guidelines may help you more effectively encode nonverbal messages sent using your hands, arms, body, and face.

Gestures

- **Illustrators** make our verbal communication more engaging. We recommend that people conducting phone interviews or communicating via telephone make an effort to gesture as they speak, even though people cannot see the gestures, because it will make their words more engaging.
- **Adaptors** are unconscious body movements that help individuals adapt to an immediate or uncomfortable situation (Beebe et al., 2018). They include but are not limited to twirling hair, fidgeting in a seat, and playing with jewelry (Adler et al., 2020). Adaptors can hurt your credibility in professional situations, as they may communicate nervousness and lack of confidence. Consider your standard adaptors and monitor them to avoid creating unfavourable impressions.
- **Gestures** include movements of hands and arms that send messages about

your emotional state (Adler et al., 2020). Since many gestures are spontaneous or subconscious, raising awareness and monitoring them is essential. Be aware that clenched hands may signal aggression or anger, nail biting or fidgeting may signal nervousness, and finger tapping may signal boredom.

Eye Contact

- Culture, status, gender, age, and setting can influence eye contact. Eye contact is helpful in initiating and regulating conversations. To make sure someone is available for interaction and to avoid being perceived as rude, it is usually a good idea to "catch their eye" before you start talking to them.
- Avoiding eye contact or shifting your eye contact from place to place can make others think you are deceptive or inattentive. Minimize distractions by moving a clock, closing a door, or closing window blinds to help minimize distractions that may lure your eye contact away.

Facial Expressions

- Facial expressions manage the expression of emotions to intensify what you are feeling, diminish what you are feeling, cover up what you are feeling, express a different emotion than you are feeling, or simulate an emotion you are not feeling (Adler et al., 2020).
- Be aware of the power of emotional contagion, or the spread of emotion from one person to another. Since facial expressions are key for emotional communication, you may be able to strategically use your facial expressions to cheer someone up, lighten a mood, or create a more serious and sombre tone.
- Smiles are especially powerful as an immediacy behaviour and a rapport-building tool. When appropriate, smiles can help disarm a potentially hostile person or de-escalate the conflict.

Haptics

The following guidelines may help you more effectively encode nonverbal signals using touch:

- Remember that culture, status, gender, age, and setting influence how we send and interpret touch messages.
- In professional and social settings, touching others on the arm or shoulder is generally okay. Although we might touch others on the arm or shoulder with our hand, it is often too intimate to touch our hand to another person's hand in a professional or social/casual setting.

These are types of touch to avoid (Andersen, 1999):

- Avoid touching strangers unless being introduced or offering assistance.
- Avoid hurtful touches and apologize if they occur, even if accidentally.
- Avoid startling or surprising another person with your touch.
- Avoid interrupting touches such as hugging someone while they are talking to someone else.
- Avoid moving people out of the way with only touch — pair your touch with a verbal message such as "excuse me."
- Avoid overly aggressive touch, especially when disguised as playful (e.g., horseplay taken too far).
- Avoid combining touch with negative criticism; a hand on the shoulder during a critical statement can increase a person's defensiveness and make them seem condescending or aggressive.

Vocalics

The following guidelines may help you more effectively encode nonverbal signals using paralanguage.

- Vocal variety increases listener and speaker engagement, understanding, information recall, and motivation. Having a more expressive voice that varies appropriately in rate, pitch, and volume can help you achieve communication goals related to maintaining attention, effectively conveying information, and getting others to act in a particular way.

Proxemics

The following may help you more effectively encode nonverbal signals related to interpersonal distances.

- When breaches of personal space occur, it is a social norm to make nonverbal adjustments such as lowering our level of immediacy, changing our body orientations, and using objects to separate ourselves from others. To reduce immediacy, we engage in civil inattention and reduce the eye contact we make with others. We also shift the front of our body away from others since it has most of our sensory inputs and allows access to body parts considered vulnerable, such as the stomach, face, and genitals (Andersen, 1999). When we cannot shift our bodies, we often use coats, bags, books, or hands to physically separate or block off the front of our bodies from others.

Chronemics

The following guideline may help you more effectively encode time-related nonverbal signals.

- Regarding talk time and turn-taking, research shows that people who take a little longer with their turn, holding the floor slightly longer than normal, are seen as more credible than people who talk too much or too little (Andersen, 1999).
- Our lateness or promptness can send messages about our professionalism, dependability, or other personality traits. Formal time usually applies to professional situations where we are expected to be on time or even a few minutes early. You would not generally want to be late for class, work, a job interview, a medical appointment, etcetera. Informal time applies to casual and interpersonal situations where there is much more variation in expectations for promptness.
- Balancing personal quality time is an important part of interpersonal relationships. Sometimes time has to be budgeted so that it can be saved and spent with certain people or on certain occasions — such as date nights for couples or family time for parents and children or other relatives.

Personal Presentation and Environment

The following guidelines may help you more effectively encode nonverbal signals related to personal presentation and environment.

- Recognize that personal presentation carries much weight in terms of initial impressions. Hence, meeting the expectations and social norms for dress, grooming, and other artifactual communication is especially important for impression management.
- Recognize that some environments facilitate communication, and some do not. A traditional front-facing business or educational setup is designed for one person to communicate with a larger audience. Students in large classrooms or lecture halls cannot as easily interact with each other because they cannot see each other face-to-face without turning. When appropriate, placing individuals in a horseshoe or circular arrangement allows everyone to make eye contact and facilitates interaction.
- Where you choose to sit can also impact perceived characteristics and leadership decisions. Individuals who sit at the head or center of a table are often chosen to be leaders by others because of their nonverbal accessibility — a decision that may have more to do with where the person chose to sit than the person's perceived or actual leadership abilities. Research has found that juries often select their foreperson based on where he or she happens to sit (Andersen, 1999). Keep this in mind the next time you take your seat at a meeting.

Guidelines for Interpreting Nonverbal Messages

We learn to decode or interpret nonverbal messages through practice and internalizing social norms. Following these suggestions to become a better encoder of nonverbal communication will lead to better decoding competence through increased awareness. Since nonverbal communication is more ambiguous than verbal communication, we must interpret these cues as clusters within contexts.

There Is No Nonverbal Dictionary

The first guideline for decoding nonverbal communication is to realize there is no nonverbal dictionary. Some nonverbal scholars and many nonverbal skill trainers have tried to catalog nonverbal communication the same way we do verbal communication to create dictionary-like guides that people can use to interpret nonverbal signals. Although those guides may contain many valid "rules" of nonverbal communication, those rules are always relative to the individual, social, and cultural contexts in which an interaction occurs.

Recognize That Certain Nonverbal Signals Are Related

The second guideline for decoding nonverbal signals is recognizing that specific nonverbal signals are related. Nonverbal rulebooks are ineffective because they typically view a nonverbal signal in isolation, similar to how dictionaries separately list denotative definitions of words. We can look at them as progressive or layered to get a more nuanced understanding of the meaning behind nonverbal cues. For example, people engaging in negative critical evaluation of a speaker may cross their legs, one arm over their stomach, and put the other arm up so the index finger rests close to the eye. In contrast, the chin rests on the thumb (Pease & Pease, 2004, p. 22). A person would not likely perform all those signals simultaneously. Instead, they would likely start with one and then layer in more cues as the feelings intensified. If we notice that a person is starting to build related signals such as the ones above onto one another, we might be able to intervene in the negative reaction that is building. Of course, as nonverbal cues are layered on, they may contradict other signals, so we can turn to context clues to aid our interpretation.

Read Nonverbal Cues in Context

People also have **idiosyncratic [unique to an individual]** nonverbal behaviours, which create an individual context that varies with each person. Even though we generally fit into certain social and cultural patterns, some people deviate from those norms. For example, some cultures tend toward less touching and greater interpersonal distances during interactions. Canadians fall into this general

category, but some people were socialized into these norms as individuals, deviate from them and might touch more and stand closer to others while conversing. As the idiosyncratic communicator inches toward his or her conversational partner, the partner may inch back to reestablish the interpersonal distance norm. Such deviations may make people misinterpret sexual or romantic interests or feel uncomfortable. While these actions could indicate such interest, they could also be idiosyncratic. These individual differences can increase the ambiguity of nonverbal communication, as noted, but when observed over time, they can help us generate meaning. Try to compare situational observed nonverbal cues to a person's typical or baseline nonverbal behaviour to help avoid misinterpretation. Sometimes, it is impossible to know what sorts of individual nonverbal behaviours or idiosyncrasies people have because there is no relational history. In such cases, we must turn to our knowledge about specific types of nonverbal communication or draw from more general contextual knowledge.

Interpreting Cues within Specific Channels

When nonverbal cues are ambiguous or contextual clues do not help interpret nonverbal clusters, we may have to look at nonverbal behaviours within specific channels. Remember that the following tips are not hard and fast rules and are usually more meaningful when adapted according to a specific person or context. In addition, many of the suggestions in the section on encoding competence can be adapted to decoding.

Kinesics

Pease and Pease (2004) have identified several common nonverbal behaviours related to body expressions and eye contact:

Gestures

- While it does not always mean an individual is honest, displaying palms is largely unconsciously encoded and decoded as a sign of openness and

truthfulness (p. 27). Conversely, crossing your arms in front of your chest is decoded almost everywhere as a negative gesture that conveys defensiveness (p. 90).

- We typically decode people putting their hands in their pockets as a gesture that indicates shyness or discomfort. Men often subconsciously put their hands in their pockets when they do not want to participate in a conversation (p. 34). But displaying the thumb or thumbs while the rest of the hand is in the pocket signals a dominant or authoritative attitude (p. 121).
- Nervous communicators may have distracting mannerisms in the form of adaptors that you will likely need to tune out to focus more on other verbal and nonverbal cues.

Head Movements and Posture

- The head leaning over and being supported by a hand can typically be decoded as a sign of boredom (p. 155), the thumb supporting the chin and the index finger touching the head close to the temple or eye as a sign of negative evaluative thoughts (p.157), and the chin stroke as a sign that an individual is going through a decision-making process (p. 58).
- In terms of seated posture, leaning back is usually decoded as a sign of informality and indifference (p. 243), straddling a chair as a sign of dominance (but also some insecurity because the individual is protecting the vulnerable front part of his or her body, p. 244), and leaning forward as a signal of interest and attentiveness (p. 234).

Eye Contact

- When someone is avoiding eye contact, do not immediately assume they are not listening or are hiding something, especially if you are conveying complex or surprising information. Since looking away also signals cognitive activity, they may be processing information, and you may need to pause and ask if they need a second to think or if they need you to repeat or explain anything more.
- A “sideways glance,” which entails keeping the head and face pointed straight ahead while focusing the eyes to the left or right, has multiple contradictory

meanings ranging from interest to uncertainty to hostility. When the sideways glance is paired with a slightly raised eyebrow or smile, it is a sign of interest. When combined with a furrowed brow, it generally conveys uncertainty. But add a frown to that mix can signal hostility.

Facial Expressions

- Recognize discrepancies between facial expressions, nonverbal gestures, and verbal communication. Since facial expressions are often subconscious, they may indicate incongruency within a speaker's message. You may need to follow up with questions or consider contextual clues to increase your understanding.

Haptics

- Consider the status and power dynamics involved in touch. People who have or feel they have more social power in a situation typically engage more in touching behaviour than those with less social power. So you may decode a touch from a professor differently from that of a classmate or colleague.

Vocalics

- People often decode personality traits from a person's vocal quality. A person's vocal signature generally results from their neck, head, and mouth physiology. Therefore, a nasal or deep voice may not have any relevant meaning within an interaction. Do not focus on something unpleasant or pleasant about someone's voice; focus on the content rather than the vocal quality.

Proxemics

The size of a person's "territory" often speaks to that person's status. At universities, deans may have suites; department chairs may have large offices with multiple

sitting areas; lower-ranked professors may have “cozier” offices stuffed with books and file cabinets; and adjunct instructors may have a shared office or desk or no office space at all.

Since infringements on others’ territory can arouse angry reactions and even lead to violence (think of the countless stories of neighbours fighting over a fence or tree), be sensitive to territorial markers. In secondary and public territories, look for informal markers such as drinks, books, or jackets and respect them when possible.

Personal Presentation and Environment

Be aware of the physical attractiveness bias, which leads people to sometimes mistakenly equate attractiveness with goodness (Hargie, 2011, p. 81). A person’s attractive or unattractive physical presentation can lead to irrelevant decoding distracting from other, more meaningful, nonverbal cues.

Detecting Deception

Although people rely more on nonverbal than verbal communication to determine whether or not a person is being deceptive, there is no set profile of deceptive behaviour that you can use to create your nonverbally-based lie detector. Research finds that people generally perceive themselves as suitable detectors of deception. Still, when tested, they only accurately detect deception at levels a little higher than they would by random chance. Since deception is widespread, it is estimated that we only detect about half the lies we are told, meaning we all operate on false information without even being aware of it. Although this may disappoint those of you who like to think of yourselves as human lie detectors, some forces are working against our deception-detecting abilities. One such force is the truth bias, which leads us to believe that a person is telling the truth, especially if we know and like that person. Conversely, people with interpersonal trust issues and in occupations such as law enforcement may also have a lie bias, meaning they assume people are lying to them more often than not (Andersen, 1999).



Figure 4.3.1. There is no one "tell" that gives away when someone is lying.

Certain nonverbal cues have been associated with deception. Still, the problem is that these cues are also associated with other behaviours, which could lead you to assume someone is deceptive when nervous, guilty, or excited. In general, more expressive people are better deceivers, and people who are typically anxious are not good liars. Also, people who are better self-monitors (high emotional intelligence) are better deceivers because they are aware of verbal and nonverbal signals that may "give them away" and may be better able to control or account for them. Research also shows that people get better at lying as they get older because they learn more about the intricacies of communication signals, and they also get more time to practice (Andersen, 1999). Studies have found that actors, politicians, lawyers, and salespeople are also better liars because they are generally higher self-monitors and have learned to suppress internal feelings and monitor their external behaviours.

Deception and Communication Competence

Deception and nonverbal communication indicate that heightened arousal and increased cognitive demands contribute to the presence of nonverbal behaviours

that can be associated with deception. Remember, however, that these nonverbal behaviours are not solely related to deception but manifest as a result of other emotional or cognitive states. Additionally, when people are falsely accused of deception, the signs that they exhibit as a result of the stress of being falsely accused are very similar to those exhibited by people engaging in deception.

There are common misconceptions about what behaviours are associated with deception. Behaviours mistakenly linked to deception include longer response times, slower speech rates, decreased eye contact, increased body movements, excessive swallowing, and less smiling. None of these have consistently been associated with deception (Andersen, 1999). As we have learned, people also tend to give more weight to nonverbal than verbal cues when evaluating the truthfulness of a message. This predisposition can lead us to focus on nonverbal cues while overlooking verbal signals of deception. Aside from nonverbal cues, also listen for inconsistencies in or contradictions between statements, which can also be used to tell when others are being deceptive. The following are some nonverbal signals associated with deception in research but be cautious about viewing these as absolutes since individual and contextual differences should also be considered.

Gestures. One of the most powerful associations between nonverbal behaviours and deception is the presence of adaptors. Self-touches, such as wringing hands and object-adaptors, such as playing with a pencil or messing with clothing, have been shown to correlate with deception. However, some highly experienced deceivers can control adaptors' presence (Andersen, 1999).

Eye contact. Deceivers tend to use more eye contact when lying to friends, perhaps to increase feelings of immediacy or warmth, and less eye contact when lying to strangers. A review of many deception studies indicates that increased eye blinking is associated with deception, probably because of heightened arousal and cognitive activity (Andersen, 1999).

Facial expressions. People can intentionally use facial expressions to deceive; this may occur in five primary ways. People may show feelings that they do not have, show a higher intensity of feelings than they have, try to show no feelings, show less feelings than they have, or mask one feeling with another.

Vocalics. One of the most common nonverbal signs of deception is speech errors. As you will recall, verbal fillers and other speech disfluencies are studied as part

of vocalics; examples include false starts, stutters, and fillers. An increase in verbal pitch may be associated with deception and is likely caused by heightened arousal and tension.

Chronemics. Speech turns are often thought to correspond to deception, but researchers have no consensus about the exact relationship. Deceivers talk less, especially in response to direct questions (Andersen, 1999).

Key Takeaways

- To improve your competence in encoding nonverbal messages, increase your awareness of the messages you are sending and receiving and the contexts in which your communication occurs. Since nonverbal communication is multichannel, it is essential to know that nonverbal cues can complement, enhance, or contradict each other. Also, realize that the norms and expectations for sending nonverbal messages, especially touch and personal space, vary widely between relational and professional contexts.
- To improve your competence in decoding nonverbal messages, look for multiple cues, avoid putting too much weight on any one cue, and evaluate nonverbal messages in relation to the context and your previous experiences with the other person. Although we put more weight on nonverbal communication than verbal when trying to detect deception, no set guide can tell us whether another person is being deceptive.

Exercises

1. Using concepts from this section, analyze your nonverbal encoding competence. What are your strengths and weaknesses? Do the same for your nonverbal decoding competence.
2. To understand how chronemics relates to nonverbal communication norms, answer the following questions: In what situations is it important to be early? In what situations can you arrive late? How long would you wait for someone you were meeting for a group project for a class? A job interview?
3. A healthcare professional may assess a patient experiencing pain. If a patient is uncommunicative or unable to understand what you are saying, what types of nonverbal communication might you

look for or notice? What nonverbal messages might you see if a client is comfortable? What messages might you see if a client was in pain? What types of nonverbal messages do you send when you are in pain?

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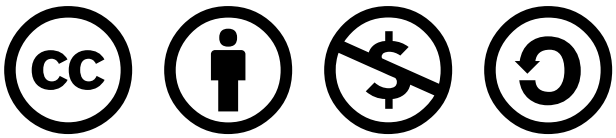
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CHAPTER 5: LISTENING AND EMPATHY

Listening is a primary means through which we learn new information. The process of listening can help us meet instrumental needs as we learn things that help us complete specific tasks at work or school and get things done in general. Listening to our relational partners provides support, which is an integral part of relational maintenance and helps us meet our relational needs. Listening to what others say about us helps us develop an accurate self-concept, which can help us more strategically communicate our identity needs to project to others our desired self. Overall, improving our listening skills can help us be better students, better relational partners, and more successful professionals. Unless you plan on taking more communication courses in the future, this chapter may be the only instruction you receive on the basics of listening versus hearing, listening styles, listening difficulties, listening stages, and listening empathetically and critically.

Together, listening and empathy can help us build stronger relationships with others by allowing us to truly understand and connect with others on a deeper level. By listening to someone with empathy, we can create a safe space for them to express their thoughts and feelings, which can lead to increased trust, understanding, and mutual respect. Additionally, listening with empathy can also help us gain new insights and perspectives, which can be valuable in both personal and professional contexts. In this chapter, we will discuss in more detail the difference between listening and hearing, the stages of listening, barriers to effective listening, providing constructive feedback and conclude with some guidance on improving listening competence.

5.1 Listening Versus Hearing

Learning Objectives

- Explain the differences between listening and hearing.
- Explain the benefits of listening.

"Are you listening to me?" You may have been asked this question because the speaker thinks you are nodding off or daydreaming. Many mistakenly think of listening as a "passive" activity: We need to sit there and let words wash over us. Yet the reality is different. Effective listening demands active participation.

In our sender-oriented society, listening is often overlooked as an essential part of the communication process. Still, research shows that adults spend about 45 % of their time listening, more than any other communicative activity. In some contexts, we spend even more time listening than that. On average, workers spend 55 % of their workday listening, and managers spend about 63 % listening (Hargie, 2011).

The Oprah Magazine featured a cover article titled, "How to Talk So People *Really* Listen: Four Ways to Make Yourself Heard." This title leads us to expect a list of ways to leave listening to others and insists that they do so, but the article contains a surprise ending. The final piece of advice is this: "You can't go wrong by showing interest in what other people say and making them feel important. In other words, the better *you* listen, the more you'll be listened to" (Jarvis, 2009).

The adage, "We have two ears but only one mouth," reminds us that listening is often even more important than talking. Still, many of us think that listening is the same as hearing and therefore put minimal effort into the process. The reality is quite different.

Listening versus Hearing

Hearing is an automatic brain response to sound that requires no effort. Most of the time, we are surrounded by sounds like airplanes, lawnmowers, furnace blowers, the rattling of pots and pans, and so on. We hear those incidental sounds, and unless we have a reason to do otherwise, we train ourselves to ignore them. We learn to filter out sounds that mean little to us, just as we choose to hear our ringing phones and other sounds that are more important to us.

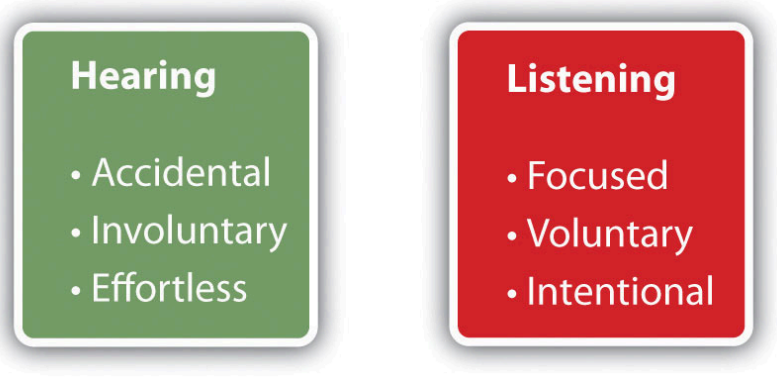


Figure 5.1.1. Hearing does not equal listening—the image of two boxes.

On the other hand, **listening** is purposeful and focused rather than accidental. As a result, it requires motivation and effort. Listening is *active, focused, concentrated attention to understanding the meanings expressed by a speaker*. We do not always listen at our best; later, we will examine some reasons for this and strategies for becoming more active critical listeners.

Benefits of Listening

Today, you can gain much information and entertainment through reading and electronic recordings rather than real-time listening. If you become distracted and let your attention wander, you can go back and replay a recording. However, much

of what we need to hear at work and in our relationships is not recorded and can not be replayed. There are many benefits to listening effectively and competently in real-time, including the compelling benefits discussed next.

Since listening is a primary means of learning new information, good listening skills help us complete tasks effectively at home, work or school and get things done. Second, when we listen attentively to others, we support them; thus, effective listening helps us build and maintain satisfying relationships with those who are important to us. Third, listening to what others say about us helps us develop an accurate self-concept, which can help us put our best foot forward and communicate our identity in the best way possible. Fourth, practical listening skills can help us be better students and more successful professionals.

Key Takeaways

- Hearing is the physiological process of attending to sound within one's environment; listening is a focused, concentrated approach to understanding the message a source sends.
- Learning how to be an effective listener has numerous advantages. Effective listening can help you complete tasks efficiently, become a better partner in your relationships, serve as a reality check for your self-identity, become a better student, and even improve your public speaking abilities.

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5.2 Stages of Listening

Learning Objectives

- Describe the listening process.
- Explain the receiving stage of listening.
- Explain the interpreting stage of listening.
- Explain the recalling stage of listening.
- Explain the evaluating stage of listening.

Listening is the learned process of receiving, interpreting, recalling, evaluating, and responding to verbal and nonverbal messages. We engage with the listening process long before engaging in recognizable verbal or nonverbal communication.

The Listening Process

Listening is a process that does not have a defined start and finish. Like the communication process, listening is multidimensional (Halone et al., 1998) and consists of complex processes:

Cognitive processes: attending to, understanding, receiving and interpreting contextual and relational messages;

Behavioural processes: responding with verbal and/or nonverbal feedback; and

Affective processes: being motivated to attend to others.

Listening does not unfold in a linear, step-by-step fashion. Models of processes are informative in that they help us visualize specific components, but keep in mind

that they do not capture the speed, overlapping nature, or overall complexity of the listening process in action.

Listening Stages

Stage 1. Receiving

Before engaging in other steps in the listening process, we must take in stimuli through our senses. In any communication encounter, we often return to the receiving stage as we process incoming feedback and new messages. This part of the listening process is more physiological than others, including cognitive and relational elements. We primarily take in the information needed for listening through auditory and visual channels. Although we do not often think about visual cues as a part of listening, they influence how we interpret messages. For example, seeing a person's face when we hear their voice allows us to take in nonverbal cues from facial expressions and eye contact. The fact that these visual cues are missing in email, text, and phone interactions presents difficulties for reading contextual clues into meaning received through auditory-only channels.



Figure 5.2.1. The first stage of the listening process is receiving stimuli through auditory and visual channels.

The chapter on perception discussed some of how incoming stimuli are filtered. These perceptual filters also play a role in listening. Some stimuli never make it in, some are filtered into subconsciousness, and others are filtered into various levels of consciousness based on their salience. Recall that salience is the degree to which something attracts our attention in a particular context and that we tend to find salient, visually or audibly stimulating things that meet our needs or interests. Think about how it is much easier to listen to a lecture on a very interesting subject than one you do not.

It is essential to consider how noise influences the way in which we receive messages. Some noises interfere primarily with hearing, which is the physical process of receiving stimuli through internal and external components of the ears and eyes. Some interfere with listening, which is the cognitive process of processing the stimuli taken in during hearing. While hearing leads to listening, they are not the same thing. Environmental noise, such as music, other people talking, or traffic sounds, interferes with the physiological aspects of hearing. Psychological noise, such as stress and anger, interferes primarily with the cognitive processes of listening. We can enhance our ability to receive and, in turn, listen by trying to minimize noise.

Stage 2. Interpreting

During the interpreting stage of listening, we combine the visual and auditory information we receive and try to make meaning out of that information using schemata. The interpreting stage engages cognitive and relational processing as we take in informational, contextual, and relational cues and connect them meaningfully to previous experiences. We may begin to understand the stimuli we have received through the interpreting stage. When we understand something, we can attach meaning by connecting information to previous experiences. By comparing new information with old information, we may also update or revise particular schemata if we find the new information relevant and credible. Suppose we have difficulty interpreting information, meaning we do not have previous experience or information in our schemata to make sense of it. In that case, transferring the information into our long-term memory for later recall is difficult. In situations where understanding the information we receive isn't important or is

not a goal, this stage may be fairly short or even skipped. After all, we can move something to our long-term memory by repetition and later recall it without ever understanding it. A student might earn perfect scores on exams in an anatomy class in post-secondary because they were able to memorize and recall, for example, all the organs in the digestive system, and might still be able to do that over a decade later, but neither then nor now could tell you the significance or function of most of those organs, because they did not get to a level of understanding but simply stored the information for later recall.

Stage 3. Recalling

Our ability to recall information depends on some physiological limits of how memory works. Overall, our memories are known to be fallible. We forget half of what we hear immediately after hearing it, recall 35 % after eight hours, and recall 20 % after a day (Hargie, 2011). Our memory consists of multiple "storage units," including sensory storage, short-term memory, working memory, and long-term memory (Hargie, 2011).

Our sensory storage is substantial in terms of capacity but limited in terms of length of storage. We can hold large amounts of unsorted visual information, but only for about a tenth of a second. By comparison, we can hold large amounts of unsorted auditory information for up to four seconds. This initial memory storage unit does not provide much use for our study of communication, as these large but quickly expiring chunks of sensory data are primarily used in reactionary and instinctual ways.

As stimuli are organized and interpreted, they go to short-term memory, where they either expire and are forgotten or transferred to long-term memory. **Short-term memory** is a mental storage capability that can retain stimuli for 20 seconds to 1 minute. **Long-term memory** is a mental storage capability to which stimuli in short-term memory can be transferred if they are connected to an existing schema and in which information can be stored indefinitely (Hargie, 2011). Working memory is a temporarily accessed storage space activated during high cognitive demand. When using working memory, we can temporarily store information and process and use it simultaneously. This is different from our typical memory function. Information must usually make it to long-term memory before we can call it back to apply

to a current situation. People with good working memories can remember recent information, process it, and apply it to other incoming information. This can be very useful during high-stress situations.

Although **recall** is an important part of the listening process, there is not a direct correlation between being good at recalling information and being a good listener. Some people have excellent memories and recall abilities and can tell a very accurate story from many years earlier when they should be listening and not showing off their recall abilities. Recall is an important part of the listening process because it is often used to assess listening abilities and effectiveness. Many quizzes and tests in school are based on recall and are often used to assess how well students comprehended information presented in class, which indicates how well they listened. When recall is our only goal, we excel at it. Experiments have found that people can memorize and later recall a set of faces and names with nearly 100 % recall when sitting in a quiet lab and asked to do so. But throw in external noise, more visual stimuli, and multiple contextual influences, and we cannot remember the name of the person we were just introduced to a minute earlier. Even in interpersonal encounters, we rely on recall to test whether or not someone is listening. Imagine that Azam is talking to his friend Belle, sitting across from him in a restaurant booth. Annoyed that Belle keeps checking her phone, Azam stops and asks, “Are you listening?” Belle inevitably replies, “Yes,” since we rarely confess to our poor listening habits, and Azam replies, “Well, what did I just say?”

Stage 4. Evaluating

When we evaluate something, we judge its credibility, completeness, and worth. Regarding credibility, we try to determine the degree to which we believe a speaker’s statements are correct or true. Regarding completeness, we try to “read between the lines” and evaluate the message in relation to what we know about the topic or situation being discussed. We evaluate the worth of a message by making a value judgment about whether we think the message or idea is good/bad, right/wrong, or desirable/undesirable. All these evaluating aspects require critical thinking skills, which we are not born with, but must develop over time through our personal and intellectual development.

Studying communication is a great way to build your critical thinking skills because

you learn much more about the taken-for-granted aspects of communication, which gives you tools to analyze and critique messages, senders, and contexts. Critical thinking and listening skills also help you take a more proactive role in the communication process rather than being a passive receiver of messages that may not be credible, complete, or worthwhile. One danger within the evaluation stage of listening is to focus your evaluative lenses more on the speaker than the message. This can quickly become a barrier to effective listening if you begin to prejudge a speaker based on their identity or characteristics rather than the content of their message. We will learn more about how to avoid slipping into a person-centred rather than a message-centred evaluative stance later.

Stage 5. Responding

Responding entails sending verbal and nonverbal messages that indicate attentiveness and understanding or a lack thereof. From our earlier discussion of the communication model, you may be able to connect this part of the listening process to feedback. Later, we will learn more specifics about how to encode and decode the verbal and nonverbal cues sent during the responding stage. Still, we all know from experience that some signs indicate whether a person is paying attention and understanding a message.

We send verbal and nonverbal feedback while another person is talking and after they are done. **Back-channel cues,** also known as verbal fillers, are the verbal and nonverbal signals we send while someone is talking and can consist of verbal cues like “uh-huh,” “oh,” and “right,” and nonverbal cues such as direct eye contact, head nods, and leaning forward. Back-channel cues are generally a form of positive feedback that indicates others are actively listening. People also send cues intentionally and unintentionally that indicate they are not listening. If another person is looking away, fidgeting, texting, or turning away, we will likely interpret those responses negatively.



Figure 5.2.2. Listeners respond to speakers nonverbally using back-channel cues, and verbally using paraphrasing and clarifying questions.

Paraphrasing is a responding behaviour that shows that you understand what was communicated. When you **paraphrase** information, you rephrase the message in your own words. For example, you might say the following to start a paraphrased response: "What I heard you say was …" or "It seems like you are saying …" You can also ask clarifying questions to get more information. It is often a good idea to pair paraphrasing with a question to keep a conversation flowing. For example, you might pose the following paraphrase–question pair: "It seems like you believe you were treated unfairly. Is that right?" Or you might ask a stand-alone question like "What did your boss do that made you think he was 'playing favourites?'" Be sure to paraphrase or ask questions once a person's turn is over because interrupting can also be interpreted as a sign of not listening. Paraphrasing is also a good tool for computer-mediated communication, especially since miscommunication can occur due to a lack of nonverbal and other contextual cues.

Activity: Check Your Understanding

An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=2646#h5p-8

Key Takeaways

- The receiving stage of listening is when an individual hears a message sent by a speaker.
- The interpreting stage of listening occurs when a receiver interprets or attaches meaning to the message.
- The recall stage of listening is when a listener either places information into long-term memory or forgets the information presented.
- The evaluating stage of listening occurs when a listener thinks critically about and judges the message's content or the speaker's character.
- The responding stage of listening occurs when a listener provides verbal or nonverbal feedback to the speaker or message.

Exercises

1. The recalling stage of the listening process is where many people experience challenges. What techniques could you use to improve the recall of specific information such as the client's names, critical concepts in classes or instructions or directions provided verbally?

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5.3 Listening Styles and Types

Learning Objectives

- Explain the importance of listening.
- Describe five main types of listening.
- Compare and contrast four styles of listening.
- Explain each listening response.

The Importance of Listening

Understanding how listening works provides the foundation to explore why we listen, including various types and styles. In general, listening helps us achieve all the communication goals (physical, instrumental, relational, and identity) we previously learned about. Listening is also crucial in academic, professional, and personal contexts. We spend more time listening than any other form of communication (Adler et al., 2020). Post-secondary students spend nearly 11 % of their time writing, 16 % speaking, 17 % reading, and more than 55 % listening (Emanuel et al., 2008).

Listening is likely a desired outcome in the workplace. It may include job performance, building and maintaining effective relationships (trust, intimacy, and relational satisfaction), and competence (knowledge, skills, and ability/adaptability) (Kluger & Itzchakov, 2022).

Listening also has implications for our personal lives and relationships. We should be aware of the power of listening to make someone else feel better and open our perceptual field to new sources of information. The following list reviews some of the main functions of listening that are relevant in multiple contexts.

The primary purposes of listening are:

- to focus on messages sent by other people or noises coming from our surroundings;
- to better our understanding of other people's communication;
- to critically evaluate other people's messages;
- to monitor nonverbal signals;
- to indicate that we are interested or paying attention;
- to empathize with others and show we care for them (relational maintenance); and
- to engage in negotiation, dialogue, or other exchanges that result in a shared understanding of or agreement on an issue.

(Hargie, 2011)

Types of Listening

Listening serves many purposes, and different situations require different types of listening. Our listening affects our communication and how others respond. For example, when we listen to empathize with others, our communication will likely be supportive and open, leading the other person to feel *"heard"* and supported and hopefully view the interaction positively (Bodie & Villaume, 2003, p. 48). The main types of listening we will discuss are discriminative, informational, critical, empathetic, and active.

Discriminative Listening

Discriminative listening is a focused and usually instrumental type of listening that is primarily physiological and occurs mainly at the receiving stage of the listening process. Here we listen to scan and monitor our surroundings to isolate particular auditory or visual stimuli. For example, we may focus our listening on a dark part of the yard while walking the dog at night to determine if the noise we just heard presents us with any danger. Or we may look for a particular nonverbal cue to let us know our conversational partner received our message (Hargie, 2011). Without

hearing impairment, we have an innate and physiologic ability to engage in discriminative listening. Although this is the most basic form of listening, it provides the foundation for more intentional listening skills. This type of listening can be refined and honed. Consider how musicians, singers, and mechanics exercise specialized discriminative listening to isolate specific aural stimuli and how actors, detectives, and sculptors discriminate visual cues that allow them to analyze, make meaning from, or recreate nuanced behaviour (Tyagi, 2013).

Informational Listening

Informational listening entails listening to comprehend and retain information. This type of listening is not evaluative and is common in teaching and learning contexts ranging from a student listening to an informative speech to an out-of-towner listening to directions to the nearest gas station. We also use informational listening when we listen to news reports, voicemails, and briefings at work. Since retention and recall are essential components of informative listening, good concentration and memory skills are critical. These are also skills that many post-secondary students struggle with, at least in the first years of college, but will be expected to have mastered once they are in professional contexts. In many professional contexts, informational listening is essential, especially when receiving instructions. Students will be expected to process verbal instructions more frequently in their profession than in college. Most college professors provide detailed instructions and handouts with assignments so students can review them as needed. Still, many supervisors and managers will expect you to take the initiative to remember or record vital information. Additionally, many bosses are more open to questions or requests to repeat themselves than are professors.

Critical Listening

Critical listening entails analyzing or evaluating a message based on information presented verbally and information that can be inferred from context. An acute listener evaluates a message, accepts it, rejects it, or decides to withhold judgment and seek more information. As constant consumers of messages, we need to be able to assess the credibility of speakers and their messages and identify various

persuasive appeals and faulty logic (known as fallacies). Critical listening is essential during persuasive exchanges, but employing some critical listening is always recommended because you may find yourself in a persuasive interaction that you thought was informative. As noted when we discussed nonverbal communication, people often disguise inferences as facts. Critical-listening skills are helpful when listening to a persuasive speech in class or processing any persuasive media messages we receive daily. Judges employ critical listening (with varying degrees of competence) on talent competition shows such as *RuPaul's Drag Race*, *America's Got Talent*, and *The Voice*. While the exchanges between judge and contestant on these shows are expected to be subjective and critical, critical listening is also essential when listening to speakers who have stated or implied objectivity, such as parents, teachers, health professionals, clients, and religious leaders. Here are some helpful guidelines for critical listening:

- **Listen to the entire message before making a judgment.** Listen to the entire message. Withhold judgment or decision-making until the speaker is finished. Sometimes speakers will surprise you.
- **Listen for evidence.** Does the communicator present research that reinforces their message, such as references to research or studies conducted by credible authors and organizations, or does the message consist solely of the speaker's unsupported statements and opinions? Critical listening is essential to learning to separate unsubstantiated opinions from facts. This is not to say that speakers should not express their opinions. Many of the greatest speeches in history include personal opinions. Consider, for example, Martin Luther King Jr.'s famous *"I Have a Dream"* speech, in which he expressed his wish for the future of American society. Critical listeners may agree or disagree with a speaker's opinions, but the point is that they know when a message they are hearing is based on opinion and when it is factual.
- **Analyze the speaker's credibility, including possible hidden agendas.** Speaker credibility refers to the listeners' judgment about whether the communicator is trustworthy and qualified to speak about the topic. Consider whether the speaker has educational background or experience on the topic. Do the speaker's prior actions and reputation convince you the speaker can be trusted? Other than the speaker's qualifications and trustworthiness, another important consideration is whether the speaker has a hidden agenda, a motive that is not shared with listeners. For example, assume

you are watching a television program that has promised to inform the audience about the properties of Vitamin D. The program features several health professionals with impressive credentials. At first, you are convinced that these professionals are trustworthy and the information they present is solid and unbiased. However, several minutes into the broadcast, the health professionals urge viewers to buy a particular brand of Vitamin D — one developed by the doctors and dieticians on the program. At this point, an excellent critical listener will realize the program, which appeared to be informative, is persuasive and that the supposedly unbiased health professionals have a hidden agenda. This calls into question the claims made in the program.

- **Consider the communicator's nonverbal communication, not just their words.** Sometimes a communicator's body language or paralanguage will add important clues to the message. Although we want to be fair about judging unfairly, it is still important to consider how the speaker presents the message.

Empathetic Listening



Figure 5.3.1. We support others through empathetic listening by trying to "feel with" them.

Empathy and sympathy are often practiced interchangeably, but they are very different. **Sympathy** infers compassion for another person's situation from your

perspective. **Empathy** enables you to view another person's situation from their perspective. Empathy does not require you to agree with another person but instead understand their world (Adler et al., 2020). Additionally, empathetic listening is other-oriented and should be genuine. Because of our centrality in our perceptual world, empathetic listening can be difficult. It is often much easier for us to tell our story or give advice than to listen to and empathize with someone else. We should remember that sometimes others need to be heard, and our feedback is not desired. Empathetic listening is vital for understanding others and building strong interpersonal relationships.

Styles of Listening

If listening were easy and everyone went about it the same way, teaching listening would be much easier. One reason for the complexity of teaching listening is that people have different ways of listening. Watson and colleagues (1995) identified four listening styles: people-, action-, content-, and time-oriented. As you read through these styles, try to identify your preferred style.

The **people-oriented listener** is interested in the speaker. People-oriented listeners listen to the message to learn how the speaker thinks and feels. For instance, when people-oriented listeners hear an interview with a famous rap artist, they are likely to be more curious about the artist than about music, even though they might also appreciate the artist's work. If you are a people-oriented listener, you might have questions you hope will be answered, such as: Does the artist feel successful? What's it like to be famous? What kind of educational background does the artist have? In the same way, if we are listening to a doctor who responded to the earthquake crisis in Haiti, we might be more interested in the doctor as a person than in the state of affairs for Haitians. Why did the doctor go to Haiti? How did they get away from their practice and patients? How many lives did they save? We might be less interested in the equally important and urgent needs for food, shelter, and sanitation following the earthquake. The people-oriented listener will likely be more attentive to the speaker than the message itself.

Action-oriented listeners are primarily interested in finding out what the speaker wants. Does the speaker want votes, donations, volunteers, or something else? It is sometimes complicated for an action-oriented speaker to listen to details such

as the descriptions, evidence, and explanations with which the speaker builds their case.

Action-oriented listening is sometimes called "*task-oriented listening.*" This type of listener seeks a clear message about what needs to be done and might have less patience for listening to the reasons behind the task. This can be especially true if the reasons are complicated. For example, before an airplane waiting on the runway takes flight, a flight attendant delivers a brief speech called the preflight safety briefing. To appeal to action-oriented listeners, the flight attendant does not read the findings of a safety study or explain that the Federal Aviation Administration mandates the content of the speech. Instead, the attendant says only to buckle up so we can leave. An action-oriented listener finds "buckling up" more compelling than a message about the underlying reasons.

Content-oriented listeners are interested in the message. These listeners desire well-developed information with solid explanations and credible evidence. They listen to details and carefully analyze and evaluate the message. Many audience members will be content-oriented listeners when you give a speech or lead a meeting at work. Therefore, you must present information in the fullest way you can. You can emphasize or advocate an idea that is important to you. Still, if you exaggerate or omit essential information, you could lose credibility in the minds of your content-oriented audience.

Time-oriented listeners prefer a message that gets to the point quickly. They can become impatient with slow delivery or lengthy explanations. This type of listener may be receptive for only a brief time and may become rude or even hostile if the communicator expects a more extended focus of attention. They may convey impatience through eye-rolling, shifting in their seats, checking their phones, and other inappropriate behaviours. If you have been asked to speak to a group of junior high school students, you must realize that their attention spans are not as long as those of post-secondary students. For this reason, speeches or conversations with young audiences must be shorter and include more variety than speeches to adults.

In the workplace, some listeners will have real-time constraints, not merely perceived ones. When working with clients in various healthcare settings, it is essential to be mindful of the time and the amount of information being relayed. If

a health professional spends significant time talking, the client may begin to tune out or check out the conversation entirely.

Listening Responses

Who do you think is a great listener? Why did you name that particular person? How can you tell that person is a good listener? You probably recognize good listeners based on their nonverbal and verbal cues. In this section, we will discuss different types of listening responses. We all do not listen in the same way. Also, each situation is different and requires a distinct style appropriate for that situation.

Types of Listening Responses

Adler, Rosenfeld, and Proctor are three interpersonal scholars who have done quite a bit of research and writing on listening (2013). Their research found different types of listening responses: silent listening, questioning, paraphrasing, empathizing, supporting, analyzing, evaluating, and advising, as shown in Figure 5.3.2.

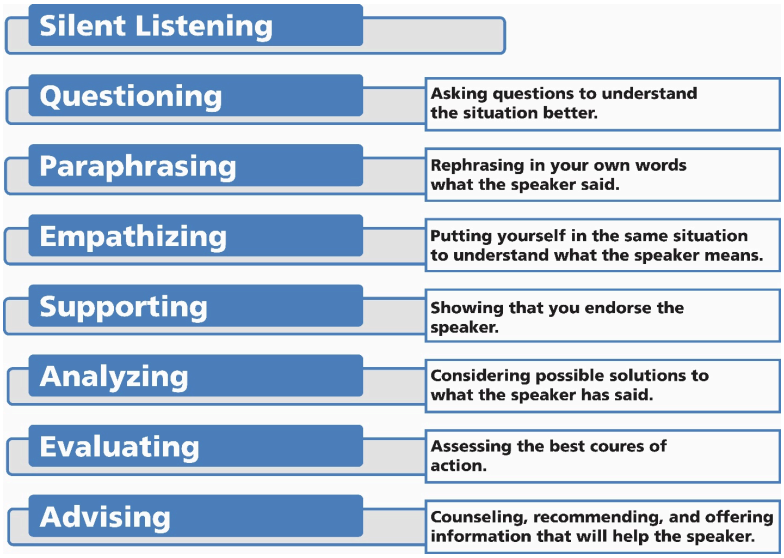


Figure 5.3.2. Types of Listening Responses (Adler, Rosenfeld & Proctor, 2013). Image Description (see Appendix A 5.3.2).

Silent Listening

Silent listening occurs when you say nothing. It is ideal in certain situations and awful in other situations. However, when used correctly, it can be very powerful. If misused, you could give the wrong impression to someone. It is appropriate to use when you do not want to encourage more talking. It also shows openness to the speaker's ideas.

Sometimes people get angry when someone does not respond. They might think this person is not listening or trying to avoid the situation. But it might be because the person is just trying to gather their thoughts, or perhaps responding would be inappropriate. In certain situations, such as counselling, silent listening can be beneficial because it can help people figure out their feelings and emotions.

Questioning

In situations where you want to get answers, it might be beneficial to use questioning. You can do this in a variety of ways. There are several ways to question in a sincere, nondirective way.

You might have different types of questions. Sincere questions are created to find a genuine answer. **Counterfeit questions** are disguised attempts to send a message, not to receive one. Sometimes, counterfeit questions can cause the listener to be defensive. For instance, if someone asks, "Tell me how often you used marijuana." The speaker implies that you have used marijuana, even though that has not been established. A speaker can use questions that make statements by emphasizing specific words or phrases, stating an opinion or feeling on the subject. They can ask questions with hidden agendas, like "Do you have $5.00?" because the person would like to borrow that money. Some questions seek "correct" answers. For instance, when a friend says, "Do I look fat?" You probably have a correct or ideal answer. Some questions are based on unchecked assumptions. An example would be, "Why are you not listening?" This example implies that the person was not listening when they were listening.

Paraphrasing

Paraphrasing is restating, in your own words, the message you think the speaker just sent. There are three types of paraphrasing. First, you can change the speaker's wording to indicate what you think they meant. Second, you can offer an example of what you think the speaker is talking about. Third, you can reflect on the underlying theme of a speaker's remarks. Paraphrasing represents mindful listening in the way that you are trying to analyze and understand the speaker's information. Paraphrasing can be used to summarize facts and to gain consensus in essential discussions. This could be used in a business meeting to ensure all details were discussed and agreed upon. Paraphrasing can also be used to understand personal information more accurately. Think about being in a counsellor's office. Counsellors often paraphrase information to understand precisely how the individual is feeling and to analyze information better.

Empathizing

Empathizing is used to show that you identify with a speaker's information. You are not empathizing when you deny others the right to their feelings. Statements such as, "It is not a big deal" or "Who cares?" indicates that the listener is trying to make the speaker feel differently. In minimizing the significance of the situation, you are interpreting the situation from your perspective and passing judgment. However, empathetic statements such as "I understand how difficult this must be for you," or "It sounds like you are going through a tough time right now," or "I am here for you, and I want to help you through this," demonstrate understanding, connection and compassion.

Supporting

Sometimes, in a discussion, people want to know how you feel about them instead of a reflection on the content. Examples of **supportive** responses include the following: agreement, offers to help, praise, reassurance, and diversion. The value of receiving support when faced with personal problems is very important. This has been shown to enhance psychological, physical, and relational health. To effectively

support others, you must meet specific criteria. You have to make sure that your expression of support is sincere, that the other person can accept your support, and focus on “here and now” rather than “then and there.”

Analyzing

Analyzing helps gain different alternatives and perspectives by interpreting the speaker’s message. However, this can be problematic at times. Sometimes the speaker might not be able to understand your perspective or may become more confused by accepting it. To avoid this, steps must be taken in advance. These include tentatively offering your interpretation instead of as an absolute fact. Being more sensitive about it might be more comfortable for the speaker to accept. You can also ensure that your analysis has a reasonable chance of being correct. It would leave the person more confused if it were inaccurate. Also, you must ensure the person will be receptive to your analysis and that your motive for offering your opinion is to help the other person. An analysis offered under any other circumstances is useless.

Evaluating

Evaluating appraises the speaker’s thoughts or behaviours. The evaluation can be favourable (“that makes sense”) or negative (passing judgment, “you do not have a clue what you are talking about”). Unfavourable evaluations can be critical or noncritical (constructive criticism). Two conditions offer the best chance for evaluations to be received: if the person with the problem requested an evaluation and if it is genuinely constructive and not designed as a putdown.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=139#h5p-45

Key Takeaways

- Listening is a learned process and a skill we can improve with concerted effort. Improving our listening skills can benefit us academically, professionally, and personally.
- People-oriented listeners pay more attention to the personal details about a speaker than the content of the message.
- Action-oriented listeners pay attention to what the communicator wants them to do, such as donating, volunteering, etc.
- Content-oriented listeners pay attention to the meaning and credibility of a speaker's message. They are interested in learning.
- Time-oriented listeners want messages that are concise as a result of limited attention spans or time commitments.
- Discriminative listening is the most basic form of distinguishing between and focusing on specific sounds. Informational listening is when we seek to comprehend and retain information. Through critical listening, we analyze and evaluate messages at various levels. We use empathetic listening to understand or experience a speaker's feelings and provide emotional support.

Exercises

1. Identify how critical listening might be helpful for you in each of the following contexts: academic, professional, and personal.
2. Listening scholars have noted that empathetic listening is the most challenging type. Do you agree? Why or why not?
3. Which style of listening best describes you and why? Which style do you struggle with or like the least, and why?

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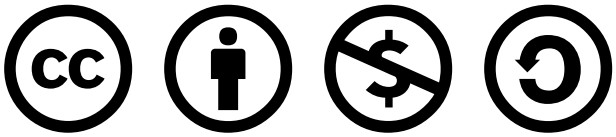
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5.4 Barriers to Effective Listening

Learning Objectives

- Discuss environmental and physical barriers to effective listening.
- Explain how cognitive and personal factors can present barriers to effective listening.
- Describe poor listening practices.

Barriers to effective listening are present at every stage of the listening process (Hargie, 2011). At the receiving stage, noise can block or distort incoming stimuli. At the interpreting stage, complex or abstract information may be challenging to relate to previous experiences, making it difficult to understand. At the recalling stage, natural limits to our memory and challenges to concentration can interfere with remembering. At the evaluating stage, personal biases and prejudices can lead us to block people out or assume we know what they will say. A lack of paraphrasing and questioning skills at the responding stage can lead to misunderstanding. The following section will explore how environmental, physical, cognitive, and personal factors and poor listening practices present barriers to effective listening.

Environmental and Physical Barriers to Listening

Environmental factors such as lighting, temperature, and furniture affect our listening ability. A room that is too dark can make us sleepy, just as a room that is too warm or cool can raise awareness of our physical discomfort to the point that it is distracting. Some seating arrangements facilitate listening, while others separate people. In general, listening is easier when listeners can make direct eye contact

with and are in close physical proximity to a speaker. While the ability to effectively see and hear a person increases people's confidence in their abilities to receive and process information, eye contact and physical proximity can still be affected by noise. As we learned earlier, environmental noises such as a whirring air conditioner, barking dogs, or a ringing fire alarm can interfere with listening despite direct lines of sight and well-placed furniture.

Physiologic noise, like environmental noise, can interfere with our ability to process incoming information. This is a physical barrier to effective listening because it emanates from our physical body. **Physiologic noise** stems from a physical illness, injury, or bodily stress. Ailments such as a cold, a broken leg, a headache, or a poison ivy outbreak can range from annoying to unbearably painful and impact our listening relative to their intensity. Another type of noise, psychological noise, bridges physical and cognitive barriers to effective listening. **Psychological noise**, or noise stemming from our psychological states, including moods and arousal, can facilitate or impede listening. Any mood or state of arousal (positive or negative) that is too far above or below our regular baseline creates a barrier to message reception and processing. The generally positive emotional state of being in love can be just as much of a barrier as feeling hatred. Excited arousal can distract as much as anxious arousal. Stress about upcoming events ranging from losing a job to having surgery to wondering what to eat for lunch, can overshadow incoming messages. While we will explore cognitive barriers to effective listening more in the next section, psychological noise is relevant here, given that the body and mind are not entirely separate. They can interact in ways that further interfere with listening. Fatigue, for example, is usually a combination of psychological and physiological stresses that manifests as stress (psychological noise) and weakness, sleepiness, and tiredness (physiological noise). Additionally, mental anxiety (psychological noise) can manifest in our bodies through trembling, sweating, blushing, or even breaking out in rashes.

Cognitive and Personal Barriers to Listening

Aside from the barriers to effective listening that may be present in the environment or emanate from our bodies, cognitive limits, a lack of listening preparation, difficult or disorganized messages, and prejudices can interfere with

listening. Whether you call it multitasking, daydreaming, glazing over, or drifting off, we all cognitively process other things while receiving messages. If you think of your listening mind as a wall of 10 televisions, you may notice that in some situations, 5 of the 10 televisions are tuned into one channel. If that one channel is a lecture your professor gives, you exert about half of your cognitive processing abilities on one message. In another situation, all 10 televisions may be on different channels. The fact that we can process more than one thing simultaneously offers advantages and disadvantages. But unless we can better understand how our cognitive capacities and personal preferences affect our listening, we will likely experience more barriers than benefits.

Difference Between Speech and Thought Rate

Our ability to process more information than that which comes from one speaker or source creates a barrier to effective listening. While people speak at a rate of 125 to 175 words per minute, we can process between 400 and 800 words per minute (Hargie, 2011). This gap between speech rate and thought rate allows us to side-process any thoughts that can distract from a more important message. Because of this gap, giving one message our "undivided attention" is impossible, but we can occupy other channels with thoughts related to the central message. For example, using some of your extra cognitive processing abilities to repeat, rephrase, or reorganize messages coming from one source allows you to use that extra capacity in a way that reinforces the primary message.

The difference between speech and thought rate connects with personal barriers to listening since personal concerns are often the focus of competing thoughts that can take us away from listening and challenge our ability to concentrate on others' messages. For example, when our self-consciousness is raised, we may be too busy thinking about how we look, how we are sitting, or what others think of us to be attentive to an incoming message. Additionally, we are often challenged when presented with messages that we do not find personally relevant. In general, we employ selective attention, which refers to our tendency to focus on the messages that benefit us somehow and filter others out. So the student checking their Instagram or Twitter feed during class may suddenly switch their attention back to

the previously ignored professor when the following words are spoken: “This will be important for the exam.”



Figure 5.4.1 Drifting attention is a common barrier to listening.

Another common barrier to effective listening stems from the speech and thought rate divide in response preparation. **Response preparation** refers to our tendency to rehearse what we will say next while a speaker is still talking. Rehearsal of what we will say once a speaker’s turn is an important part of the listening process between the recalling and evaluation or the evaluation and responding stage. Rehearsal becomes problematic when response preparation begins as someone is receiving a message and has not had time to engage in interpretation or recall. In this sense, we are listening with the goal of responding instead of with the goal of understanding, which can lead us to miss important information that could influence our response.

Lack of Listening Preparation

Another barrier to effective listening is a general lack of **listening preparation.** Unfortunately, most people have never received any formal training or instruction related to listening. Although some think listening skills develop over time, competent listening is difficult and enhancing listening skills takes concerted effort.

Even when listening education is available, people do not embrace it as readily as they do opportunities to enhance their speaking skills. Often students and teachers approach the listening part of a communications course less enthusiastically than others. Listening is often viewed as an annoyance, a chore, or ignored or minimized as part of the communication process. In addition, our individualistic society values speaking more than listening, as the speakers are sometimes literally in the spotlight. Although listening competence is a crucial part of social interaction, and many value others we perceive as "good listeners," listening does not get the same kind of praise, attention, instruction, or credibility as speaking. Teachers, parents, and relational partners explicitly convey the importance of listening through statements like "You better listen to me," "Listen closely," and "Listen up." Still, these demands are rarely paired with concrete instruction.

Poor Messages or Speakers

Poor messages or speakers also present a barrier to effective listening. Sometimes our trouble listening originates in the sender. In terms of message construction, poorly structured messages or messages that are too vague, jargon-filled, or simple can present listening difficulties. Regarding speakers' delivery, verbal fillers, monotone voices, distracting movements, or a dishevelled appearance can cognitively inhibit our ability to process a message (Hargie, 2011). As we will learn, speakers can employ particular strategies to create listenable messages that take some of the burdens of the listener by tailoring a message to be heard and processed easily. Listening also becomes complicated when a speaker tries to present too much information. Information overload is a common barrier to effective listening that good speakers can help mitigate by building redundancy into their speeches and providing concrete examples of new information to help audience members interpret and understand the key ideas.

Prejudice

Oscar Wilde said, "*Listening is a very dangerous thing. If one listens, one may be convinced.*" Unfortunately, some of our default ways of processing information and perceiving others lead us to rigid thinking. When we engage in **prejudiced**

listening, we usually try to preserve our ways of thinking and avoid being convinced of something different. This type of prejudice is a barrier to effective listening because when we prejudge a person based on their identity or ideas, we usually stop listening actively and ethically.

We exhibit prejudice in our listening in several ways, some more obvious than others. For example, we may claim to be in a hurry and only selectively address the parts of a message that we agree with, or that are not controversial. We may also operate from a state of denial where we avoid a subject or person altogether so that our views are not challenged. Prejudices based on a person's identity, such as race, age, occupation, or appearance, may lead us to assume that we know what they will say, essentially closing down the listening process. Keeping an open mind and checking perception can help us identify prejudiced listening and shift into more competent listening practices.

Technology, Multitasking, and Listening

Do you like to listen to music while you do homework? Do you clean your apartment while talking to your mom on the phone? Your answers to these questions will point to your preferences for multitasking. Do you text in class? Suppose you answered "yes" to most of these. In that case, you align with the general practices of the "net generation" of digital users for whom multitasking, especially with various forms of media, is a way of life. **Multitasking** is a concept that has been around for a while and emerged along with the increasing expectation that we will fill multiple role demands throughout the day. Multitasking can be relatively straightforward and beneficial — for example, if we listen to motivating music while working out. But multitasking can be inefficient, especially when one or more of our concurrent tasks are complex or unfamiliar to us (Bardhi et al., 2010, p. 318).

Media multitasking refers explicitly to using multiple forms of media simultaneously, which can positively and negatively affect listening (Bardhi et al., 2010, p. 318). The adverse effects of media multitasking have received much attention in recent years as people question the decreasing attention span within our society. Media multitasking may promote inefficiency because it can lead to distractions and plays a prominent role for many in procrastination. The numerous media engagement options can also lead to chaos as our attention is pulled in

multiple directions, creating a general sense of disorder. And many of us feel a sense of enslavement when we media multitask, as we feel like we cannot live without certain personal media outlets.

Media multitasking can also give people a sense of control, as they use multiple technologies to access various information points to solve a problem or complete a task. An employee may be able to use their iPad to look up information needed to address a concern raised during a business meeting. They could then email a link to the presenter, who could share it with the room through his laptop and a projector. Media multitasking can also increase efficiency, as people can carry out tasks faster. The links to videos and online articles in course resources allow readers to quickly access additional information about a particular subject to prepare for a presentation or complete a paper assignment. Media multitasking can also increase engagement. Aside from just reading material in a textbook, students can now access information through an author's blog or social media accounts.

Media multitasking can produce a productive experience, but does it? Media multitasking can interfere with listening at multiple stages of the process. McCoy (2016) showed that laptop use interfered with receiving, as students using them reported that they paid less attention to the class lectures. This is because students used the laptops for purposes other than taking notes or exploring class content. Of the students using laptops, 92 % checked email during lectures or used instant messaging. Furthermore, undergraduate students reported they used digital devices for non-academic purposes on average 11.7 times per day, accounting for 21% of class time (McCoy, 2016). Students using laptops also had difficulty with the interpretation stage of listening, as they found less clarity in the parts of the lecture they heard and did not understand the course material as much as students who did not use a laptop. Difficulties with receiving and interpreting create issues with recall that can lead to lower academic performance. Laptop use also negatively affected the listening abilities of students not using laptops. These students reported that they were distracted, as their attention was drawn to the laptop screens of other students.

Poor Listening Practices

The previously discussed barriers to effective listening may be difficult to overcome because they are at least partially beyond our control. Physical barriers, cognitive limitations, and perceptual biases exist within all of us. It is more realistic to believe that we can become more conscious of and lessen them than to believe that we can eliminate them. Other "bad listening" practices may be habitual but are easier to address with concerted effort. These bad listening practices include interrupting, distorted listening, eavesdropping, aggressive listening, narcissistic listening, and pseudo-listening.

Interrupting

Conversations unfold as a series of turns, and turn-taking is negotiated through a complex set of verbal and nonverbal signals that are consciously and subconsciously received. Conversational turn-taking has been likened to a dance where communicators try to avoid stepping on each other's toes. An interruption is one of the most frequent glitches in the turn-taking process, but not all interruptions are considered "bad listening." An interruption could be unintentional if we misread cues and think a person is finished speaking, only to have them start up again at the same time we do. Sometimes interruptions are more like overlapping statements that show support (e.g., "I think so too") or excitement about the conversation (e.g., "That is so cool!"). As we learned earlier, back-channel cues like "uh-huh" also overlap with a speaker's message. We may also interrupt out of necessity if we are engaged in a task with the other person and need to offer directions (e.g., "Turn left here."), instructions (e.g., "Will you whisk the eggs?"), or warnings (e.g., "Look out behind you!"). These interruptions are not typically thought of as evidence of bad listening unless they distract the speaker or are unnecessary.

Unintentional interruptions can still be bad listening if they result from mindless communication. As we have already learned, the intended meaning is less important than the meaning generated in the interaction. So if you interrupt unintentionally, but because you were only half-listening, the interruption is still evidence of bad listening. The speaker may form a negative impression of you that can not just be erased by noting that you did not "mean to interrupt." Interruptions

can also be used as an attempt to dominate a conversation. A person engaging in this interruption may lead the other communicator to try to assert dominance, too, resulting in a competition to see who can hold the floor the longest or the most often. More than likely, though, the speaker will form a negative impression of the interrupter and may withdraw from the conversation.

Distorted Listening

Distorted listening occurs in many ways. Sometimes we get the order of information wrong, which can have a relatively small negative effect if we are casually recounting a story, an annoying effect if we forget the order of turns (left, right, left or right, left, right?) in our driving directions, or a very negative effect if we recount the events of a crime out of order, which leads to faulty testimony at a criminal trial.

Rationalization is another form of distorted listening through which we adapt, edit, or skew incoming information to fit our existing schemata. We may, for example, reattribute the cause of something to suit our beliefs better. If a professor is explaining to a student why they earned a "D" on a final paper, the student could reattribute the cause from "I did not follow the paper guidelines" to "this professor is an unfair grader." Sometimes we change the words we hear to make them better fit what we are thinking. This can easily happen if we join a conversation late, overhear part of a conversation, or are lazy listeners and miss important setup and context. Passing distorted information can lead to negative consequences ranging from starting a false rumour about someone to passing along incorrect medical instructions from one healthcare provider to the next (Hargie, 2011). Lastly, adding material to a message is distorted listening that goes against our normal pattern of listening, which involves reducing the amount of information and losing some meaning as we take it in. The metaphor of "weaving a tall tale" is related to distorting through addition, as inaccurate or fabricated information is added to what was heard. The addition of material is also a common feature of gossip.

Eavesdropping

Eavesdropping is a lousy listening practice that involves a calculated and planned attempt to listen to a conversation secretly. There is a difference between eavesdropping on and overhearing a conversation. Many, if not most, of the interactions we have throughout the day occur in the presence of other people. However, given that our perceptual fields are usually focused on the interaction, we are often unaware of the other people around us or do not think they could listen to our conversation. We usually only become aware that others can listen when discussing something private.



Figure 5.4.2. Eavesdropping entails intentionally listening in on a conversation you are not a part of.

People eavesdrop for a variety of reasons. People might think another person is talking about them behind their back or that someone is engaged in illegal or unethical behaviour. Sometimes people eavesdrop to feed the gossip mill or out of curiosity (McCornack, 2007). In any case, this type of listening is considered harmful because it violates people's privacy. Consequences for eavesdropping may include an angry reaction if caught, damage to interpersonal relationships, or being perceived as dishonest and sneaky. Additionally, eavesdropping may lead people to find out information that is personally upsetting or hurtful, especially if the point of eavesdropping is to find out what people are saying behind their backs.

Aggressive Listening

Aggressive listening is a bad practice in which people focus on attacking something a speaker says (McCornack, 2007). Aggressive listeners like to ambush speakers to critique their ideas, personality, or other characteristics. Such behaviour often results from built-up frustration within an interpersonal relationship. Unfortunately, the more two people know each other, the better they will be at aggressive listening. Take the following exchange between long-term partners:

Deb:
I have considered making a salsa garden next to the side porch. I think it would be really good to be able to go pick our tomatoes and peppers and cilantro to make homemade salsa.

Summer:
Really? When are you thinking about doing it?

Deb:
Next weekend. Would you like to help?

Summer:
I will not hold my breath. Whenever you come up with some "idea of the week," you get excited about it. But do you ever follow through with it? No. We will eat salsa from the store next year, just like now.

Although Summer's initial response to Deb's idea is seemingly appropriate and optimistic, she asks the question because she has already planned her upcoming aggressive response. Summer's aggression toward Deb is not about a salsa garden but about a building frustration with what Summer perceives as Deb's lack of follow-through on her ideas. Aside from engaging in aggressive listening because of built-up frustration, such listeners may also attack others' ideas or mock their feelings because of their low self-esteem and insecurities.

Narcissistic Listening

Narcissistic listening is a form of self-centred and self-absorbed listening in which listeners try to make the interaction about them (McCornack, 2007). Narcissistic listeners redirect the focus of the conversation to them by interrupting or changing the topic. When the focus is taken off them, narcissistic listeners may give negative feedback by pouting, criticizing the speaker or topic negatively, or ignoring the speaker. A common sign of narcissistic listening is the combination of a "pivot," when listeners shift the focus back to them, and "one-upping," when listeners try to top what previous speakers have said during the interaction. You can see this narcissistic combination in the following interaction:

Bryce:
My boss has been unfair to me lately and has not let me work around my class schedule. I think I may have to quit, but I do not know where I will find another job.

Toby:
Why are you complaining? I have been working with the same stupid boss for two years. He does not even care that I am trying to get my degree and work simultaneously. And you should hear how he talks to me in front of the other employees.

Narcissistic listeners, given their self-centeredness, may fool themselves into thinking they are listening and actively contributing to a conversation. We all are urged to share our stories during interactions because other people's communication triggers our memories about related experiences. It is generally more competent to withhold sharing our stories until the other person can speak and we have given the appropriate support and response. But we all shift the focus of a conversation back to us occasionally, either because we do not know another way to respond or because we are making an attempt at empathy. Matching stories is not considered empathetic listening, but occasionally doing it does not make you a narcissistic listener.

Pseudo-listening

Do you have a friend or family member who repeats stories? If so, you have probably engaged in **pseudo-listening** as a politeness strategy. Pseudo-listening is behaving like you are paying attention to a speaker when you are not (McCornack, 2007). Outwardly visible signals of attentiveness are an essential part of the listening process, but when they are just an "act," the pseudo-listener engages in poor listening behaviours. They are not going through the stages of the listening process and will likely be unable to recall the speaker's message or offer a competent and relevant response. Although it is a poor listening practice, we all understandably engage in pseudo-listening occasionally. Suppose a friend needs someone to talk to, but you are tired or experiencing another barrier to effective listening. In that case, it may be worth engaging in pseudo-listening as a relational maintenance strategy, especially if the friend needs a sounding board and is not expecting advice or guidance. We may also pseudo-listen to a romantic partner or a grandfather's story for the fifteenth time to prevent hurting their feelings. We should avoid pseudo-listening when possible and avoid making it a listening habit. Although we may get away with it in some situations, each time, we risk being "found out," which could have negative relational consequences.

Key Takeaways

- Environmental and physical barriers to effective listening include furniture placement; environmental noise, such as sounds of traffic or people talking; physiological noise, such as a sinus headache or hunger; and psychological noise, such as stress or anger.
- Cognitive barriers to effective listening include the difference between speech and thought rate that allows us "extra room" to think about other things while someone is talking and limitations in our ability or willingness to concentrate or pay attention. Personal barriers to effective listening include a lack of listening preparation, poorly structured or poorly delivered messages, and prejudice.
- There are several poor listening practices that we should avoid, as they do not facilitate effective listening:
    - Interruptions that are unintentional or serve an essential or helpful purpose are not

considered bad listening. When interrupting becomes a habit or is used to dominate a conversation, it is a barrier to effective listening.
- Distorted listening occurs when we incorrectly recall information, skew information to fit our expectations or existing schemata or add material to embellish or change information.
- Eavesdropping is a planned attempt to secretly listen to a conversation, violating the speakers' privacy.
- Aggressive listening is a bad practice in which people pay attention to a speaker to attack something they say.
- Narcissistic listening is self-centred and self-absorbed listening in which listeners try to make the interaction about them by interrupting, changing the subject, or drawing attention away from others.
- Pseudo-listening is "fake listening." People behave as though they are paying attention and listening when they are not.

Exercises

1. We are capable of thinking faster than the speed at which the average person speaks, which allows us some room to put mental faculties toward things other than listening. What typically makes your mind wander?
2. What are the consequences of ineffective listening in any healthcare profession?
3. Of the poor listening practices listed, which do you use the most? Why do you think you use this one more than the others? What can you do to help prevent or lessen this barrier?

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5.5 Improving Listening Competence

Learning Objectives

- Identify strategies for improving listening competence at each stage of the listening process.
- Summarize the characteristics of active listening.
- Describe empathetic listening skills.
- Discuss ways to improve listening competence in relational, professional, and cultural contexts.

Many people admit that they could stand to improve their listening skills. In this section, we will learn strategies for developing and improving competence at each stage of the listening process. We will also define active listening and the behaviours that go along with it. Looking back to the types of listening discussed earlier, we will learn specific strategies for sharpening our critical and empathetic listening skills. In keeping with our focus on integrative learning, we will also apply the skills we have learned in academic, professional, and relational contexts and explore how culture and gender affect listening.

Listening Competence at Each Stage of the Listening Process

We can develop competence within each stage of the listening process, as the following list indicates:

To improve listening at the receiving stage:

- prepare yourself to listen

- discern between intentional messages and noise
- concentrate on stimuli most relevant to your listening purpose(s) or goal(s)
- be mindful of the selection and attention process as much as possible
- pay attention to turn-taking signals so you can follow the conversational flow
- avoid interrupting someone while they are speaking to maintain your ability to receive stimuli and listen

To improve listening at the interpreting stage:

- identify main points and supporting points
- use contextual clues from the person or environment to discern additional meaning
- be aware of how a relational, cultural, or situational context can influence the meaning
- be aware of the different meanings of silence
- note differences in tone of voice and other paralinguistic cues that influence the meaning

To improve listening at the recalling stage:

- use multiple sensory channels to decode messages and make more complete memories
- repeat, rephrase, and reorganize information to fit your cognitive preferences
- use mnemonic devices as a gimmick to help with recall

To improve listening at the evaluating stage:

- separate opinions, facts, inferences, and judgments
- be familiar with and able to identify persuasive strategies and fallacies of reasoning
- assess the credibility of the speaker and the message
- be aware of your own biases and how your perceptual filters can create barriers to effective listening

To improve listening at the responding stage:

- ask appropriate clarifying and follow-up questions and paraphrase information to check to understand
- give feedback that is relevant to the speaker's purpose or motivation for speaking
- adapt your response to the speaker and the context
- do not let the preparation and rehearsal of your response diminish earlier stages of listening

(Ridge, 1993)

Active Listening

Active listening refers to pairing outwardly visible positive listening behaviours with positive cognitive listening practices. Active listening can help address many environmental, physical, cognitive, and personal barriers to effective listening that we discussed earlier. The behaviours associated with active listening can also enhance informational, critical, and empathetic listening.

Active Listening Can Help Overcome Barriers to Effective Listening

Being an active listener begins before you start receiving a message. Active listeners make strategic choices and take action to set up ideal listening conditions. Physical and environmental noises can often be managed by moving locations or manipulating lighting, temperature, or furniture. When possible, avoid important listening activities during distracting psychological or physiologic noise. For example, we often know when we will be hungry, full, more awake, less awake, more anxious, or less anxious, and planning can alleviate these barriers. Knowing when you best listen can help you make strategic choices regarding which class to take and at what time. Of course, you do not always have control over your academic schedule, so you must utilize other effective listening strategies.

In the last section, we explored poor listening habits, including pseudo-listening, where we pretend to listen but do not listen.

Watch: The Big Bang Theory Active Listening

Note the transition from passive to active listening in this video. But is the woman empathizing or supporting, or is she engaging in pseudo-listening? How can you tell?



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=148#oembed-1

Video Transcript (see Appendix B 5.5.1)

Active Listening Behaviours

From the suggestions discussed, we can prepare for active listening in advance and engage in specific cognitive strategies to help us listen better. We also engage in active listening behaviours as we receive and process messages.

Eye contact is a crucial sign of active listening. Speakers usually interpret a listener's eye contact as a signal of attentiveness. While a lack of eye contact may indicate inattentiveness, it can signal cognitive processing. We usually do it unconsciously when we look away to process new information. Be aware, however, that your conversational partner may interpret this as not listening. If you do need to take a moment to think about something, you could indicate that to the other person by saying, "That is new information to me. Give me just a second to think through it." We have already learned the role that back-channel cues play in listening. An occasional head nod and "uh-huh" signals that you are paying attention. However, when we give these cues as a form of "autopilot" listening, others can usually tell we are pseudo-listening. Whether they call us on it or not, that impression could lead to negative judgments.

A more direct way to indicate active listening is to reference previous statements made by the speaker. Norms of politeness usually call on us to reference a past

statement or connect to the speaker's current thought before starting a conversational turn. Summarizing what someone said to ensure that the topic has been satisfactorily covered and understood, or segueing in a way that validates what the previous speaker said, helps regulate conversational flow. Asking probing questions is another way to directly indicate listening and to keep a conversation going since they encourage and invite a person to speak more. You can also ask questions that seek clarification and not just elaboration. Speakers should present complex information at a slower speaking rate than familiar information, but many will not. Remember that your nonverbal feedback can be helpful for a speaker, as it signals that you are listening and whether you understand. If a speaker fails to read your nonverbal feedback, you may need to follow up with verbal communication through paraphrased messages and clarifying questions.

As active listeners, we want to be excited and engaged but not let excitement manifest itself in interruptions. Being an active listener means knowing when to maintain our role as listeners and resisting the urge to take a conversational turn. Research shows that people with higher social status are more likely to interrupt others, so keep this in mind and be prepared for it if you are speaking to a high-status person or try to resist it if you are the high-status person in an interaction (Hargie, 2011).

Watch: Improve Your Listening Skills

As you watch this video, carefully consider the listening skills you can improve upon from personal and professional contexts.



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=148#oembed-2

Video Transcript (see Appendix B 5.5.2)

Note-taking



Figure 5.5.1. Good note-taking skills allow listeners to stay engaged with a message and aid in the recall of information. Image of a man taking notes in a notebook.

Note-taking can also indicate active listening. Translating information through writing into our cognitive structures and schemata allows us to interpret and assimilate information better. Of course, note-taking is not always a viable option. Taking notes during a first date or a casual exchange between new coworkers would be fairly awkward. But in some situations where we would not normally consider taking notes, a little awkwardness might be worth it to understand and recall the information. For example, many people do not think about taking notes when getting information from a health professional. Students could be invited to take notes during informal meetings because they sometimes do not think about it or do not think it is appropriate. But many people would rather have someone jot down notes instead of having to respond to follow-up questions on information that was already clearly conveyed. To help facilitate your note-taking, you might ask, "Do you mind if I jot down some notes? This seems important."

In summary, active listening is exhibited through verbal techniques such as summarizing, clarification, probing and paraphrasing, and nonverbal cues including steady eye contact with the speaker, smiling, slightly raised eyebrows, upright posture, body position that is leaned in toward the speaker, nonverbal back-

channel cues such as head nods, verbal back-channel cues such as "OK," or "oh," and a lack of distracting mannerisms like doodling or fidgeting (Hargie, 2011).

Becoming a Better Critical Listener

Critical listening involves evaluating a speaker's message's credibility, completeness, and worth. Critical listening is also important in a democracy that values free speech. North American and Western European citizens have the right to free speech, which many people duly protect. Since people can say just about anything they want, we are surrounded by countless messages that vary tremendously regarding their value, degree of ethics, accuracy, and quality. Therefore, we must responsibly and critically evaluate the messages we receive. Intentionally misleading people produce some messages that are ill-informed or motivated by the potential for personal gain. Still, such messages can be received as honest, credible, or altruistic even when they are not. Evaluating messages critically helps us have more control over and awareness of the influence such people may have on us. To critically evaluate messages, we must enhance our critical-listening skills.

Some critical-listening skills include distinguishing between facts and inferences, evaluating supporting evidence, discovering your own biases, and listening beyond the message. We noted earlier that part of being an ethical communicator is being accountable for what we say by distinguishing between facts and inferences (Hayakawa & Hayakawa, 1990). This ideal is not always met in practice, so a critical listener should make these distinctions since the speaker may not. Since facts are widely agreed-on conclusions, they can be verified through extra research. Take care in your research to note the context from which the fact emerged, as speakers may take a statistic or quote out of context, distorting its meaning. Inferences are not as easy to evaluate because they are based on unverifiable thoughts of a speaker or speculation. Inferences are usually based at least partially on something known, so evaluating whether an inference was made carefully is possible. In this sense, you may evaluate an inference based on several known facts as more credible than an inference based on one fact and more speculation. Asking a question like "What led you to think this?" is an excellent way to get the information needed to evaluate the strength of inference.

Distinguishing among facts and inferences and evaluating the credibility of supporting material are critical-listening skills that also require good informational-listening skills. Speakers may cite published or publicly available sources to support their messages in more formal speaking situations. When speakers verbally cite their sources, you can use the source's credibility to help evaluate the credibility of the speaker's message. For example, a national newspaper would likely be more credible on a major national event than a tabloid magazine or an anonymous blog. In regular interactions, people also have sources for their information but are not as likely to note them within their message. Questions like "Where did you hear that?" or "How do you know that?" can help get the information needed for critical evaluations. You can look to future chapters to learn more about persuasive strategies and how to evaluate the strength of arguments.

Discovering your biases can help you recognize when they interfere with your ability to process a message fully. Unfortunately, most people are not asked to reflect critically on their identities and perspectives unless they are in post-secondary settings. Even those who were once critically reflective in post-secondary or elsewhere may no longer be so. Biases are also challenging to discover because we do not see them as biases; we see them as normal or "the way things are." Asking yourself, "What led you to think this?" and "How do you know that?" can be a good start toward acknowledging your biases.

Last, to be a better critical listener, think beyond the message. An excellent critical listener asks what is being said and what is not being said. In whose interests are these claims being made? Whose voices or ideas are included and excluded? These questions consider that speakers intentionally and unintentionally slant, edit, or twist messages to make them fit particular perspectives or for personal gain. Also, ask yourself questions like "What are the speaker's goals?" You can also rephrase that question and direct it toward the speaker, asking them, "What is your goal in this interaction?" When nearing an evaluation or conclusion, pause and ask yourself what influenced you. Also, check your emotional involvement to know how it may influence your evaluation. Also, be aware that how likable, attractive, or friendly you think a person is may also lead you to evaluate his or her messages.

Becoming a Better Empathetic Listener

Empathy is considered an essential component of the therapeutic relationship. This involves feeling *with* them rather than *for* them. In understanding the purpose and goals of the therapeutic relationship, an empathetic approach facilitates a nuanced understanding of your clients' lived experiences. It thus can help guide your plan of care.

Reflect

- Why do you think empathy is more effective than sympathy?
- Why does sympathy "not work"?

As you will recall from section 5.1, **empathy** is the action of understanding, being aware of, appreciating, and connecting with the experiences, circumstances, and feelings of others. It involves using strategies to share understanding and connect with another person. While **sympathy** is commiserating with someone else's feelings or struggles so that whatever affects one person will affect the other. It involves a shared mental state instead of developing an understanding.
Developing empathy is a skill that will allow you to consider another person's perspectives, experiences, and feelings, or their struggles and challenges. Empathy helps you equip yourself with strategies to effectively communicate this understanding of people around you. One of the key elements of empathy is the link between considering what one person is going through and reflecting on that coming from a place of understanding. You do not need to be an expert communicator to use empathy, but this does not come without challenges, as you will find out next.

Watch the following short video explaining the difference between sympathy and empathy and how it works on a personal level. Before you watch, think about a time when you needed support and understanding from another person. Can you remember what they said? What effect did that have?

Watch: Empathy: The Human Connection to Patient

Care

As you watch the following video, reflect on the often invisible needs of those around us and the difference we can make by creating caring human connections.



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=148#oembed-3

Video Transcript (see Appendix B 5.5.3)

Compassion and empathy must also be distinguished conceptually. Like empathy, **compassion** is evoked by the experiences and suffering of others; however, a compassionate response typically involves action or commitment to not turn away. When healthcare professionals demonstrate compassion, they enter a client's suffering and commit to doing something about it. In other words, empathy gives rise to the response of compassion (Cooper, 2001). Importantly, empathy and compassion must be expressed without judgment and require setting aside perceptions of what it might be like *for you*. As such, it takes relational skills to feel with others yet maintain the objective approach necessary for alleviating the suffering of those you care for.

A prominent scholar of empathetic listening describes it this way: "Empathetic listening is to be respectful of the dignity of others. Empathetic listening is a caring, a love of the wisdom to be found in others, whoever they may be" (Bruneau, 1993). This quote conveys that empathetic listening is more philosophical than the other types of listening. We must be open to subjectivity and engage in it because we genuinely see it as worthwhile.

Combining active and empathetic listening leads to active–empathetic listening. During **active-empathetic listening**, a listener becomes actively and emotionally involved in an interaction so that it is conscious and perceived by the speaker (Bodie, 2011, p. 278). To be a better empathetic listener, we need to suspend or at least attempt to suppress our judgment of the other person or their message so we can fully attend to both. Paraphrasing is integral to empathetic listening because it helps us put the other person's words into our frame of experience without making

it about us. In addition, speaking someone else's words in our way can help evoke within us the feeling that the other person felt while saying them (Bodie, 2011, p. 278). Active-empathetic listening is more than echoing back verbal messages. We can also engage in mirroring, which refers to a listener's replication of the nonverbal signals of a speaker (Bruneau, 1993, p. 194). Health professionals, for example, are often taught to adopt a posture and tone similar to their clients to build rapport and project empathy.

Paraphrasing and questioning are valuable techniques for empathetic listening because they allow us to respond to a speaker without taking "the floor," or the attention, away for long. Specifically, questions that ask for elaboration act as "verbal door openers," inviting someone to speak more and validating their speech through active listening cues can help a person feel listened to (Hargie, 2011). Paraphrasing and asking questions is also helpful when we feel tempted to share our stories and experiences rather than maintain our listening role. These questions are not intended to solicit more information so that we can guide or direct the speaker toward a specific course of action. Although it is easier for us to slip into an advisory mode, saying things like "Well, if I were you, I would … ", we must resist the temptation to give unsolicited advice.

Empathetic listening can be worthwhile, but it also brings challenges. In terms of costs, empathetic listening can use up time and effort. Since this type of listening can not be contained within a proscribed time frame, it may be challenging for time-oriented listeners (Bruneau, 1993, p. 194). Empathetic listening can also test our endurance, as its orientation toward and focus on supporting the other requires the processing and integrating a lot of verbal and nonverbal information. Because of this potential strain, you must know your limits as an empathetic listener. While listening can be therapeutic, it is not appropriate for people without training and preparation to try to serve as a therapist. Some people have chronic issues requiring professional listening for evaluation, diagnosis, and therapy. Lending an ear is different from diagnosing and treating. If you have a friend exhibiting signs of a more serious issue that needs attention, listen to the extent that you feel comfortable. Then, be prepared to provide referrals to other resources who have had the training to help. To face these challenges, good empathetic listeners typically have a generally positive self-concept and self-esteem, are nonverbally sensitive and expressive, and are comfortable with embracing another person's subjectivity and refraining from too much analytic thought.

Becoming a Better Contextual Listener

Active, critical, and empathetic listening skills can be helpful in various contexts. Understanding the role that listening plays in professional, relational, cultural, and gendered contexts can help us more competently apply these skills. Whether listening to or evaluating messages from a supervisor, parent, or intercultural conversational partner, we have much to gain or lose based on our ability to apply listening skills and knowledge in various contexts.

Listening in Relational Contexts

Listening is central to establishing and maintaining relationships (Nelson-Jones, 2006, pp. 37–38). Without some listening competence, we would be unable to self-disclose, which is essential for establishing relationships. Newly acquainted people get to know each other through increasingly personal and reciprocal disclosures of personal information. To reciprocate a conversational partner's disclosure, we must process it through listening. Once relationships are formed, listening to others provides a psychological reward through the simple act of recognition that helps maintain our relationships. Listening to our relational partners, we are taking an interest in their lives and are willing to put our own needs and concerns aside for a moment to attend to them. Listening is also closely tied to conflict, as a lack of listening often plays a significant role in creating conflict, while effective listening helps us resolve it. Being listened to in return is part of the give-and-take of any interpersonal relationship.

Listening and Culture

Some cultures place more importance on listening than other cultures. In general, collectivistic cultures tend to value listening more than individualistic cultures that are more speaker oriented. The value placed on verbal and nonverbal meaning varies by culture and influences how we communicate and listen. A low-context communication style is one in which much of the meaning generated within an interaction comes from verbal communication rather than nonverbal or contextual

cues. Conversely, much of the meaning generated by a high-context communication style comes from nonverbal and contextual cues (Lustig & Koester, 2006). For example, Canadians of European descent generally use a low-context communication style, while people in East Asian and Latin American cultures use a high-context communication style.

Contextual communication styles affect listening in many ways. Cultures with a high-context orientation generally use less verbal communication and value silence as a form of communication, which requires listeners to pay close attention to nonverbal signals and consider contextual influences on a message. Cultures with a low-context orientation must use more verbal communication and provide explicit details since listeners are not expected to derive meaning from the context. Note that people from low-context cultures may feel frustrated by the ambiguity of speakers from high-context cultures. In contrast, speakers from high-context cultures may feel overwhelmed or even insulted by the level of detail used by low-context communicators. Cultures with a low-context communication style also tend to have a monochronic orientation toward time, while high-context cultures have a polychronic time orientation, which also affects listening.

Cultures that favour a structured and commodified orientation toward time are said to be monochronic, while cultures that favour a more flexible orientation are polychronic. Monochronic cultures such as Canada value time and action-oriented listening styles, especially in professional contexts, because time is a scarce commodity and must be managed (McCornack, 2007). This is evidenced by leaders in businesses and organizations who often request “executive summaries” that only focus on the most relevant information and who use statements like “Get to the point.” Polychronic cultures value people and content-oriented listening styles, which makes sense when we consider that polychronic cultures tend to be more collectivistic and use a high-context communication style. In collectivistic cultures, indirect communication is preferred, whereas direct communication threatens the other person’s “face” (desired public image). For example, flatly turning down a business offer would be too direct, so a person might reply with a “maybe” instead of a “no.” The person proposing, however, could draw on contextual clues that they implicitly learned through socialization to interpret the “maybe” as a “no.”

Key Takeaways

- Improving listening competence begins at the receiving stage by preparing yourself to listen and distinguishing between intentional messages and noise; at the interpreting stage by identifying main points and supporting points and considering multiple contexts; at the recalling stage by creating memories using multiple senses and repeating, rephrasing, and reorganizing messages to fit cognitive preferences; at the evaluating stage by separating facts from inferences and assessing the credibility of the speaker's message; and at the responding stage by asking appropriate questions, offering paraphrased messages, and adapting your response to the speaker and the situation.
- Active listening pairs outwardly visible positive listening behaviours with positive cognitive listening practices. It is characterized by mentally preparing yourself to listen, focusing on concentration, using appropriate verbal and nonverbal back-channel cues to signal attentiveness, and engaging in strategies such as note-taking and mentally reorganizing information to help recall.
- To apply critical-listening skills in multiple contexts, we must be able to distinguish between facts and inferences, evaluate a speaker's supporting evidence, discover our own biases, and think beyond the message.
- To practice empathetic listening skills, we must be able to support others' subjective experiences; temporarily set aside our own needs to focus on the other person; encourage elaboration through active listening and questioning; avoid the temptation to tell our own stories or give advice; effectively mirror the nonverbal communication of others; and acknowledge our limits as empathetic listeners.
- Different listening strategies may need to be applied in different listening contexts.
    - Listening is considered a necessary skill in professional contexts, but most people do not receive explicit instruction. Members of an organization should consciously create a listening environment that promotes and rewards competent listening behaviours.
    - In relational contexts, listening plays a central role in initiating relationships, as listening is required for mutual self-disclosure and maintaining relationships. Listening to our relational partners provides a psychological reward in the form of recognition. When people aren't or don't feel listened to, they may experience feelings of isolation or loneliness that can negatively affect their lives.
    - In cultural contexts, high- or low-context communication styles, monochronic or polychronic orientations toward time, and individualistic or collectivistic cultural values affect listening preferences and behaviours.

Exercises

1. Watch the following video (5 ways to listen better) and reflect on what you learned and how you can apply this to your professional practice area.

Watch: 5 Ways to Listen Better

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=148#oembed-4

Video Transcript (see Appendix B 5.5.4)

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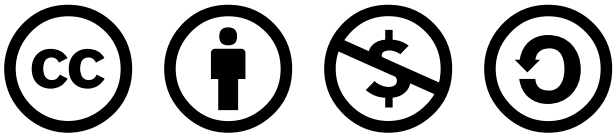
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5.6 Listenable Messages and Effective Feedback

Learning Objectives

- Describe strategies for creating listenable messages.
- Explain the guidelines for providing constructive feedback.
- Explain the guidelines for self-evaluation feedback.

We should remember that sending messages is integral to the listening process. Although we often think of listening as receiving messages, that passive view of listening overlooks the importance of message construction and feedback. In the following section, we will learn how speakers can facilitate listening by creating listenable messages and how listeners help continue the listening process through feedback for others and themselves.

Creating Listenable Messages

Some of our listening challenges would be diminished if speakers created listenable messages. **Listenable messages** are verbal messages that are individualized and intended to be understood by a listener. While most of our communication is in an "oral style," meaning spoken and designed to be heard, we sometimes create unnecessarily complex messages in ways that impede comprehension. Listenable messages can be contrasted with most written messages, which are meant to be read.

How we visually process written communication differs from how we process orally delivered and aurally received language. Aside from processing written and spoken

messages differently, we also talk and write differently. This becomes a problem for listening when conventions of written language are transferred into oral statements. You may have witnessed or experienced this difficulty if you have ever tried or watched someone else try to orally deliver a message that was written to be read, not spoken. For example, when students in class try to give a direct quote from one of their research sources or speak verbatim a dictionary definition of a word, they inevitably have fluency hiccups in the form of unintended pauses or verbal trip-ups that interfere with their ability to deliver the content. These hiccups make the message difficult for the audience to receive and comprehend.

This is not typically a problem in daily conversations because we automatically speak orally. We have a tendency, however, to stray from our natural oral style when delivering messages that we have prepared in advance — such as speeches. This is because we receive much more training in creating messages to be read than in creating messages to be spoken. We are usually expected to pick up the oral communication style through observation and trial and error. Compiling and delivering messages in an oral rather than a written style is a crucial skill for health professionals to develop. Since most people lack specific instruction in creating messages in an oral rather than written style, you should be prepared to process messages that are not as listenable as you would like. The strategies for becoming an active listener discussed earlier in this chapter will also help you mentally repair or restructure a message to make it more understandable. As a speaker, to adapt your message to a listening audience and to help facilitate the listening process, you can use the following strategies to create more listenable messages:

- use shorter, actively worded sentences
- use personal pronouns (i.e. she/her; he/him; they/them)
- use lists or other organizational constructions such as problem–solution, pro-con, or compare–contrast
- use transitions and other markers that help a listener navigate your message (time markers like “today”; order indicators like “first, second, third”; previews like “I have two things I would like to say about that”; and reviews like “So, basically I feel like we should vacation at the lake instead of the beach because … ”)
- Use examples relevant to you and your listener’s actual experiences

Giving Formal Feedback to Others

The ability to give effective feedback benefits oneself and others. Whether in professional or personal contexts, positive verbal and nonverbal feedback can boost others' confidence and academic success, and negative feedback, when delivered constructively, can provide important perception checking and lead to improvements (Hanover, 2014). Of course, negative feedback not delivered competently can lead to communication difficulties that can affect a person's self-esteem and self-efficacy. Although we rarely give formal feedback to others in interpersonal contexts, it is essential to know how to provide this type of feedback, as performance evaluations are typical in various academic and professional contexts.



Figure 5.6.1. The ability to give verbal feedback helps personal and professional relationships grow.

You will likely be asked to give feedback to another person in an academic or professional context. As health-care-related settings and businesses have moved toward more team-based work environments, peer evaluations are now commonly used to help assess job performance. Since we must know how to give competent and relevant feedback, and since the input can be helpful for the self-improvement of the receiver, many students are asked to complete peer evaluations verbally or in writing for classmates after they deliver a presentation. The key to good feedback is offering constructive feedback, consisting of specific and descriptive comments for

the receiver to apply for self-improvement. The following are guidelines for students to give feedback, and they are also adaptable to other contexts.

When Giving Feedback to Others

Focus on the behaviour, not the person. State the behaviour, describe your feelings, and end with what you want. This model enables you to avoid sounding accusatory by using "I" and focusing on behaviours instead of assumed interpretations. Example: "I have not seen you in class for a week. I am worried that you are missing important information. Can we meet soon to discuss it?" Instead of: "You do not care about this course!" (University of Waterloo, 2023).

Balance the content. Use the "sandwich approach." Provide feedback on specific strengths, reinforcing what the recipient should keep doing. Then present specific areas where growth or change is required and include specific strategies for growth or change. Additional positive statements follow this. The aim is to enhance confidence and keep opportunities for growth or change in perspective. Example: "Your presentation was great. You made good eye contact and were well-prepared. You were a little hard to hear at the back of the room, but you can overcome this with practice. Keep up the good work!" Instead of: "You did not speak loudly enough. However, the presentation went well" (University of Waterloo, para. 15, 2023).

Be specific. There is often a need for more specific comments regarding feedback on speech or presentation delivery. Students write "eye contact" on a peer comment sheet, but neither the student nor the faculty member knows what to do with the comment. While a word like "good eye contact" or "not enough eye contact" is more specific, it is not descriptive enough to make it worthwhile.

Be descriptive. It is challenging to think of an explanatory comment that is not also specific because adding detail to something usually makes the point more straightforward. The previous "not enough eye contact" comment would be more helpful and descriptive if communicated like this: "You looked at your notes more than you looked at the audience during the first 30 seconds of your speech."

Be positive. If you deliver your feedback in writing, pretend that you are speaking

directly to the person and write it the same way. Comments like “stop fidgeting” or “get more sources” would not likely come out during verbal feedback because we know they sound too harsh. The same tone, however, can be communicated through written feedback. Instead, make comments that are framed in such a way as to avoid defensiveness or hurt feelings.

Be constructive. Although we want to be positive in our feedback, comments like “good job” are not constructive because a communicator cannot take that comment and do something with it. A statement like “You were able to explain the client’s issue/problem/history so I could make sense of it. The part about health promotion was not as clear. Perhaps you could break it down the same way you made the client’s issue/problem/history to make it clearer for people like me who are outside the field of health studies,” which is much more helpful. This statement is positively framed, specific, and constructive because the speaker can continue to build on the thoroughly reviewed skill by applying it to another part of the speech identified as a place for improvement.

Be realistic. Comments such as “Do not be nervous” are not constructive or practical. Instead, you could say, “I know the first group teaching session is tough, but remember that we are all in the same situation and here to learn. I tried the Box breathing exercises discussed in class yesterday, which calmed my nerves. Maybe they will work for you, too?” Comments like “your accent made it difficult for me to understand you” could be accurate but may signal a need for more listening effort since we all technically have accents and changing them, if possible, at all, would take considerable time and effort.

Be relevant. Feedback should be relevant to the assignment, task, or context. Feedback like “cool nail polish” and “nice smile,” although meant as compliments, are irrelevant in formal feedback unless you are a fashion consultant or a dentist.

Giving Formal Feedback to Yourself

An effective way to improve our communication competence is to give ourselves feedback on specific communication skills. Self-evaluation can be difficult because people may think their performance was effective and therefore does not need

critique, or they may become their worst critic, which can negatively affect self-efficacy. The key to effective self-evaluation is identifying strengths and opportunities for growth and change, evaluating yourself within the task's context, and setting concrete goals for future performance. Here are some guidelines for self-evaluation of student presentations.

When Giving Feedback to Yourself

Identify strengths and areas of opportunity for growth or change. We tend to be our worst critics, so avoid nitpicking or over-focusing on one aspect of your communication that annoys and sticks out to you. Likely, the focus of your criticism was not nearly as noticeable or even noticed by others. For example, a student once wrote a self-critique, of which about 90 % focused on how their face looked red. Although that was important to them when they rewatched the video, it was not a big deal for the audience members.

Evaluate yourself within the context of the task or assignment guidelines. If you are asked to speak creatively, do not spend the majority of your self-evaluation critiquing your use of gestures. People tend to overanalyze aspects of their delivery, which usually only accounts for a portion of the overall effectiveness of a message, and under analyze their presentation of critical ideas and content. If the expectation was to present complex technical information concretely, you could focus on using examples and attempts to make the concepts relevant to the listeners.

Set goals for next time. Goal setting is important because most of us need a concrete benchmark against which to evaluate our progress. Once goals are achieved, they can be "checked off" and added to our ongoing skill set, enhancing confidence and leading to more advanced goals.

Revisit goals and assess progress at regular intervals. We may not always achieve our goals, so we must revisit them periodically to assess our progress. If you did not meet a goal, determine why and create an action plan to try again. If you did achieve a goal, try to build on that confidence to meet future goals.

Key Takeaways

- To create listenable messages, which are verbal messages tailored to be understood by a listener, avoid long or complex sentences, use personal pronouns, use lists or other organizational constructions, use transitions and other markers to help your listener navigate your message, and use relevant examples.
- Although we rarely give formal feedback in interpersonal contexts, we give informal feedback regularly to our relational partners that can enhance or detract from their self-esteem and affect our relationships. While we also give informal feedback in academic and professional contexts, it is common practice to give formal feedback in performance evaluations or general comments on an idea, presentation, or teaching session.
- When giving feedback to others, be specific, descriptive, optimistic, constructive, realistic, and relevant.
- When giving feedback to yourself, identify strengths and areas of opportunity for growth or change, evaluate yourself within the context of the task or assignment, set goals for next time, and revisit goals to assess progress.

Exercises

1. Apply the strategies for creating listenable messages to a presentation you recently gave or one you are currently working on. Which strategies did or will you employ? Why?
2. Recall an instance in which someone gave you feedback that did not meet the guidelines in this section. In what ways did the person's feedback fall short of these, and what could the person have done to improve their feedback?
3. Using the guidelines for self-evaluation (feedback to self), assess one of your recent skill completions, presentations, or communication skills.

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CHAPTER 6: THE ART OF INTERVIEWING

In addition to models of communication, many theoretical approaches can be used to inform your communication with clients and families. The theoretical approach you select may depend on the client population you work with, the institution you work in, and personal preference based on your expertise and experience.

Common types of approaches that align with health studies and therapeutic communication may be trauma and violence-informed, relational inquiry, or anti-racist approaches. The following sections provide an overview of each approach and case study examples from the health studies field of nursing. Please note that these approaches can be applied to any health studies field of practice.

Effective interviewing skills are crucial for healthcare providers to understand a client's symptoms, medical history, concerns, and expectations. By mastering the art of healthcare interviewing, healthcare providers can build trust with their clients, gather accurate information, and provide effective care.

In this chapter, we will explore theoretical approaches to interviewing, the art of health care interviewing involves the ability to ask relevant questions, actively listen to the client's responses, and communicate with empathy and respect.

6.1 Trauma and Violence-Informed Approach to Communication

Learning Objectives

- Define a trauma and violence-informed approach.
- Explain the purpose of using a trauma and violence-informed approach.
- Identify communication techniques relevant to a trauma and violence-informed approach.

When working in healthcare, it is essential to engage in communication from a **trauma and violence-informed approach**, which involves integrating an understanding of the need for:

- physical and emotional safety
- choice and control
- empowerment

(Trauma-Informed Practice Guide, 2013, p. 12).

A trauma and violence-informed approach can be used as one part of therapeutic communication. It involves emphasizing confidentiality, identifying the interview purpose, letting the client set the pace of the interview and shaping it based on their needs, and engaging in the collaborative intervention so that the client is in control and empowered. As you apply this approach, you should always consider how to promote safety, control, and choice for the client.

Given how pervasive trauma is in clinical practice, it makes sense to incorporate a

trauma-informed approach into your communication and way of being with clients. This approach is beneficial because you will often not know which of your clients has experienced trauma or the circumstances of their trauma. Trauma includes the emotional consequences of a distressing event (Centre for Addiction and Mental Health [CAMH], 2023). Many circumstances can lead to trauma, including child abuse and neglect, sexual assault and intimate personal violence, bullying and harassment, car accidents, the death of someone close to you, natural disaster, and war.

Points of Consideration

Indigenous Populations

Among Indigenous populations, historical and intergenerational trauma caused by Canada's oppressive colonial policies and practices, as well as the destructive effects of residential school systems, takes the form of unresolved grief and trauma passed from one generation to the next (Mash et al., 2015; O'Neil et al., 2016). It has also led to a silencing of experiences (O'Neil et al., 2016), impacts on Indigenous identity (Lavallee & Poole, 2010), and has caused feelings of worthlessness, self-hatred, fear, and powerlessness (Chrisjohn & Young, 2006; Health Council of Canada, 2012), as well as mental health issues including anxiety, depression, post-traumatic stress disorder, and substance use and addictions (Assembly of First Nations, 1994; Brave Heart, 2003; Chrisjohn & Young, 2006; Mash et al., 2015; O'Neil et al., 2016).

Because the trauma and violence-informed communication approach assumes the presence of trauma, it does not require the client to disclose their experience and thereby risk retraumatizing them through repeated disclosure (Trauma-Informed Practice Guide, 2013).

Case Study 1 (An example of a trauma and violence-informed approach to interviewing)

A 19-year-old client presents alone at urgent care. The reason for seeking care noted on the client's chart is pain, swelling, and bruising on the index and middle digits of the left hand and a suspected fracture. Upon entry into the examination room, the

nurse observes healed bruising under the client's right eye and contusions on the client's neck.

RN: Hello, Franco Alonso; my name is Pita Kora, and I will be your registered nurse today. You can call me Pita, and my pronouns are she/her. What would you like me to call you, and what pronouns do you use?

Client: Franco and he/him are fine.

Rationale: Introduce yourself using your first and last name and explain your designation — this action promotes accountability for your actions, as it demonstrates that you are taking responsibility through disclosure. Asking what the client wants to be called and their pronouns contributes to their sense of control and well-being. It also conveys respect for their chosen identity.

RN: Everything we discuss will remain confidential and only be discussed among healthcare team members involved in your care.

Rationale: This emphasizes confidentiality, including the parameters about who will be privy to the information. This is important to disclose and does not mislead the client to believe that any information they provide will end with you. Indeed, as a nurse, you must report the data you collect. This honesty is fundamental to building trust and ensuring safety in a trauma-informed approach.

Client: Ok.

Rationale: In this case, you wait for the client to acknowledge your statements, which conveys respect.

RN: Today, I will ask questions about your injury and conduct a physical assessment. I will explain all steps as I go along. It will take about 15 or 20 minutes. Does that work for you?

Client: I think so ...

Rationale: By providing the client with the purpose and general plan of the interview, you share control and minimize unpredictability. By asking the client if it works for them, you include them in the process and convey collaboration. Certainty and control are essential parts of creating a safe space for dialogue.

RN: Can you tell me what happened to your fingers, Franco?

Client: They were crushed in a car door. It hurts. I think it may be broken.

Rationale: In this case, you ask an open-ended question without assumptions. This approach is better, to begin with than a series of closed-ended questions directed by you. In this case, allowing the client to share their story in their own words is essential.

RN: Ok. I am sorry to hear. That sounds painful. We will assess for any fractures. How long ago did this happen?

Rationale: You express empathy by responding to the client's words instead of how the fingers look. Responding to what the client is telling you is important to build trust. Also, the statement "we will assess for any fractures" offers the client reassurance that the injury will be attended to and acknowledges the initial concern that "it may be broken." It is essential to acknowledge the client's concern and not dismiss it.

Client: Last week. Initially, I did not think much of it, but the swelling has not disappeared, and the bruising seems worse. I was not sure if I should come.

RN: Ok, sure, I can understand that. I noticed some other bruises under your right eye and on your neck. Are they related to your finger injury?

Rationale: You convey empathy by stating that you can understand the client's decisions without judgment. You ask a closed-ended question about other injuries but should allow the client to respond at their pace.

Client: Not really. They happened around the same time, but they are not related.

RN: Ok [allow for silent pause].

Rationale: Silence can be a powerful form of communication. It works in two ways in a trauma-informed approach: first, it conveys to the client that you are unhurried and invested in what they are saying; second, it can allow the client to think through their responses, which can alleviate pressure on the client and promote their self-determination.

Client: It is a long story. I am sure you are busy.

RN: I will make time. Tell me more.

Rationale: The client may test your interest and investment to gauge trust. It is essential to foster trust within the client and tell them you are reliable. If this is not possible, explain to the client why you may not have the time but when you will. For example, "I have an urgent matter down the hall, but I will return in 5 minutes to discuss further." In such cases, it is important to follow up on your promise and not let the client down because this will likely damage any trust that has been built.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here: https://openbooks.macewan.ca/professionalcommunication/?p=164#h5p-36

Key Takeaways

- A trauma-informed approach creates a safe space for clients to engage in conversation and fosters control and choice.
- It does not require the client to disclose trauma. However, it creates a space where the client may feel safe to speak about trauma at their own pace, if relevant

Exercises

After reading the above case study, reflect on the following:

- How comfortable would you be using this technique in practice?
- Which techniques utilized within a trauma-informed approach do you feel competent using when interviewing?

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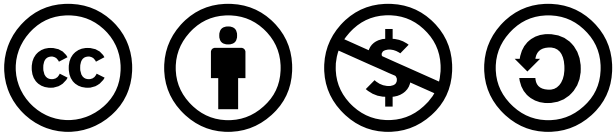
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6.2 Relational Inquiry Approach to Communication

Learning Objectives

- Define relational inquiry.
- Explain the elements of relational inquiry.
- Explain the purpose of using a relational inquiry approach in your practice area.

Relational inquiry is "the complex interplay of human life, the world, and nursing practice" (Doane & Varcoe, 2015, p. 3). This means that individuals working in health environments must avoid viewing clients on a merely individual level (Doane & Varcoe, 2021). Doane and Varcoe (2021), note that drawing upon relational inquiry involves the following elements of communication:

- **Intrapersonal** — communicating with the client in a way that allows you to assess what is occurring within all people involved (the client, you, and others).
- **Interpersonal** — communicating with the client in a way that allows you to assess what is occurring among and between all people involved, examine how they behave in the situation, and identify their priorities.
- **Contextual** — communicating with the client in a way that allows you to assess what is occurring around the people and situation involved. This includes the "structures and forces influencing the situation and shaping the intrapersonal and interpersonal responses" (Doane & Varcoe, 2021, p. 3).

Relational inquiry is a lens you can use to perceive the world. In contrast to an individualist approach, which privileges the individual as accountable for their actions and behaviours, relational inquiry brings into focus the internal dialogue of the client, their social system, and the broader context that influences their actions

and your actions as a health care provider (Doane & Varcoe, 2021). This approach to therapeutic communication is important because it can help you understand the client's situation more fully, focus on what is important to them, and collaboratively work with the client to integrate this knowledge into care.

Case Study 2 (An example of a relational-inquiry approach during an interview)

An 8-year-old client, who uses the pronouns he/him, attends a pre-operative day surgery unit for tonsillectomy (tonsil removal) with a parent present. The client has a history of six strep throat infections with antibiotic treatment in the past 18 months. The client has no previous history of surgery or anesthesia.

RN: Hello, Peter Lin; my name is Ahsan Khan, and I am a registered nurse. I will care for you until you go into surgery; a surgical nurse will take over your care. You can call me Ahsan. What name would you like me to call you?

Client: Peter.

Rationale: You introduce yourself using your first and last name and explain your designation — this action promotes accountability. You explain the extent of the care being provided, including when it will end and who will take over care for the client at different stages of their procedure. This includes the client in the care plan and minimizes uncertainty about care provision.

RN: Okay, Peter. The information you share with me will only be shared with the healthcare team caring for you. Before we begin, who is with you today?

Client: It is my mom.

Rationale: You explain confidentiality at a developmentally appropriate level for an 8-year-old. Asking the client, "Who is with you today" allows the client to identify their relationship to their caregiver in their own words.

RN: [directed to mother] Hello, what would you me to call you?

Client's mother: Please call me Wei.

Rationale: This approach includes the mother in the care and acknowledges her participation. Some providers refer to the parent generically as “mom” or “dad” as this reinforces the client (child) as the recipient of care and is also convenient for the provider for easy reference. However, calling the parent by their preferred name builds trust and rapport, acknowledges their humanity, and identifies them in the care process.

RN: Okay, Wei. [directed to both client and client’s mother] I will collect some information from you and then do a physical exam. It should take about 10 minutes. I can see in your chart here that you are scheduled for tonsil removal and that you have signed a consent form. Can I answer any questions you have before we proceed?

Rationale: Repeating the preferred name of the client’s mother helps you remember the name while acknowledging the mother’s request. You offer the client and mother a timeline and plan to help them anticipate events. You invite any questions before conducting the subjective data collection. This can be a helpful tool for you to gauge the client and can also alleviate concerns upfront.

Client and Client’s mother: Not really.

RN: Ok. Can you tell me how you are feeling today, Peter?

Rationale: This question invites an intrapersonal response as it attends to the feelings and emotions of the client. Most importantly, it acknowledges the importance of their thoughts and emotions as part of their care (rather than ignoring them) and allows you to respond to any concerns.

Client: A little nervous. Will I be able to feel anything during surgery?

RN: No, you will not feel anything during surgery. We will give you some medicine to put you into a deep sleep, and when you wake up, it will be over. We will also be giving you some medication for pain.

Rationale: Your response addresses the client’s concern by providing a definitive answer. In this case, you also anticipate the client’s concern for pain, as the concept may not be well understood, given the developmental stage.

RN: How are you feeling, Wei?

Client's mother: I am a little nervous about giving Peter pain medications.

Rationale: The question invites the mother to share intrapersonal concerns about the client's surgery. This gives the mother a family-centred approach, whereby they are also a care recipient.

RN: Tell me more about your concern.

Client's mother: Well, you read so much nowadays about opioids and addiction problems caused by prescribed medications. I am worried about Peter.

Rationale: This approach invites discussion without supposition.

RN: I can understand your concern. The pain medications the anesthesiologist administers during the surgery are short-acting, only a few hours. The anesthesiologist will speak with you before the surgery, and you can ask more specific questions. After the surgery, the surgical nurse will ensure Peter is comfortable and likely give him medication for pain and swelling. You can continue this treatment when you are home with Peter. Acetaminophen and ibuprofen are over-the-counter medications, not opioids, nor are they addictive. The surgical nurse will give you specific instructions about discharge care and a handout. If you do not get this information, feel free to ask.

Rationale: In this case, you respond directly to the mother's concern about pain medication while anticipating the plan of care and other points of interface with the health care system. This offers reassurance about future opportunities to ask and clarify concerns. Importantly, in addition to letting the mother know what to expect, you invite the mother to ask questions. This validates the mother's concern and alleviates others if they do not provide information.

Client's mother: Ok, that is reassuring. I have two kids home sick from school today with the flu. Will that be an issue for Peter?

RN: It could be. If possible, hand-washing and keeping some space from each other will be important to minimize the spread of germs. Peter will be more susceptible to getting sick after surgery.

Rationale: This explanation responds directly to the mother's question and offers

strategies to reduce the risk of the spread of germs. The response is also in everyday language, free from professional jargon.

Client's mother: Oh boy, I will try.

RN: Tell me about your support system to help you manage at home.

Client's mother: I have a good support system. My sister is helpful with the kids and is in town to give us a hand.

Rationale: In this case scenario, this question assesses interpersonal relations by asking about support systems for managing this situation.

RN: That sounds like helpful support. Are there other resources that would be helpful to you?

Rationale: This question helps assess contextual relations by identifying resources and issues requiring attention in this scenario. It invites further discussion about factors to consider in Peter's care and sheds light on the context of the dyad.

Client's mother: Well, this has all been challenging. I am transitioning jobs, so money is tight right now. I do not have extra room in the budget for a sitter. I am glad my sister is coming, but I do not know how long she can stay. My parents could help in a pinch, but they are getting older, and the kids are a lot for them to manage. And poor Peter has been sick so much lately. On the one hand, I am glad Peter will be getting the surgery to prevent other cases of strep throat, but I also feel bad that this is happening at such a stressful time for everyone. I am worried about the recovery time.

RN: I can see how that would be stressful. It is going to take a few days for Peter to recover. The important thing will be to avoid the spread of germs, as that could extend his recovery time. And you are right that this surgery should help reduce his risk of getting strep throat in the future. It sounds like you have some alternative ideas for support to help you manage the recovery.

Rationale: This response offers empathy and encouragement by acknowledging what the client's mother and their support system have shared. It also offers strategies to minimize recovery time, which seems to be a concern identified by the mother.

Client's mother: I do. Thanks.

Activity: Check Your Understanding

An interactive H5P element has been excluded from this version of the text. You can view it online here: https://openbooks.macewan.ca/professionalcommunication/?p=167#h5p-34

Key Takeaways

- A relational care approach attends to the broader social context in which clients and their support systems are situated.
- As a health professional, you should be aware of yourself and how you influence and are integrally connected to the client and the health care system.
- This approach is a beneficial tool for family-centred care.
- The relational inquiry approach requires skill and knowledge because it demands active listening and critical thinking.
- Unlike closed-ended checklists, you cannot predict how the conversation will unfold.

Exercises

After reading Case Study 2, reflect on the following questions:

1. Identify which communication skills are involved in a relational inquiry approach.
2. Explain why a relational inquiry approach is essential in your area of practice.
3. Create a scenario for your practice area incorporating a relational practice approach to interviewing.

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6.3 Anti-Racist Approach to Communication

Learning Objectives

- Define an anti-racist approach to communication.
- Identify the elements of an anti-racist approach to communication.
- Explain why health professionals should embody an anti-racist approach to communication.

Health professionals need to embody an anti-racist approach to communication. To do so, you must first understand the concepts of race and racism.

Race has been systemically and historically constructed as a variable of difference, whereby people are ascribed to designated groups based on biology, culture, or other characteristics (Bakan & Dua, 2014). Racism is the ideology and practice of sustaining, maintaining, and reinforcing differences based on race (Bakan & Dua, 2014). It results in racialized persons being excluded from everyday access points because of their race.

Anti-racism is the active process of changing attitudes, beliefs, practices, and policies to dismantle systemic hierarchy and oppressive power (Alberta Civil Liberties Centre, 2021). An anti-racism approach involves:

- identifying and challenging racism within institutions
- taking specific and directed action toward eliminating racism
- recognizing self as an agent for change toward equity

Anti-racism focuses on acknowledging and working to address racial inequities, the unequal distribution of resources, power and economic opportunity and systemic bias predicated on race and unearned privilege afforded to non-racialized people.

Linked with racism is the concept of white privilege**,** which refers to the advantage afforded to those who are non-racialized over persons of other racial backgrounds. It does not mean every white person is rich, healthy, or lavish. In Peggy McIntosh's groundbreaking essay "White Privilege: Unpacking the Invisible Knapsack" (1989), she lists several daily occurrences that are privileged based on race. For example, when applying for a mortgage, skin colour will not bias financial credibility when non-racialized people apply. Still, it can be a significant determining factor for those of other races. Recognizing white privilege can often be conflated with feeling guilty about race, but this is not the aim. A focus on individual guilt deviates from the conversation and intent of anti-racism, which is to ultimately dismantle racist structures that subjugate and discriminate against racialized people.

Health professionals play an important role in adopting and embodying an anti-racist way of being within their respective practice areas. As a health professional, you must take an anti-racist approach and advocate for your clients and colleagues when you see racism. As such, communication is essential to demonstrating anti-racism. It often begins with self-reflection and consideration of the perspective of others. See Case Study 3 for an example of an anti-racist approach to communication-related to a racialized client.

Case Study 3 (An example of an anti-racist approach to communication)

A nurse (RN1) receives a report from a colleague (RN2). During the night shift, a client was admitted for generalized abdominal pain, elevated blood pressure, and heart rate. At this time, the etiology is undetermined, but the client is scheduled for a CT scan shortly.

RN 2: Hi Rita, it was a pretty quiet night. We just admitted a patient; I cannot pronounce her name, in bed 2, for generalized pain. She says the pain is in her abdomen, but who knows what is happening? She gives me a lot of attitude; you know how it can be. We should have sent her home and told her to return if things worsened.

RN1: Why is that?

Rationale: RN1 recognizes that there may be some underlying racist attitudes and attempts to open the conversation.

RN2: Well, you know how these people are … they come to emergency for every little complaint, over-dramatizing everything. They do not care about the costs of a visit to the emergency room.

RN1: Lorna, I am uncomfortable with you referring to this patient as "these people." Your tone and choice of words insinuate that we should dismiss their pain complaints because of how the client looks and their culture.

Rationale: RN1 states how they feel using "I" statements and refers explicitly to the racist language that RN2 uses. RN1 also uses direct language to identify the passive actions of RN2.

RN2: Oh no, that is not what I meant; I am not a racist; I was not trying to say it like that. I just meant that some people are likelier to take advantage of free health care than others.

RN1: I know this might be a difficult conversation, but referring to a client as "these people" and "taking advantage of the system" *is* racist, especially since you have attached it to the patient's race and culture.

RN2: But that is not what I meant.

RN1: It might not be what you meant, but the words you chose and the meaning are racist and unacceptable. Considering our conversation, it would be good to request our manager to organize a workshop for all of us about racism and language. Additional training will illuminate how language and beliefs like "taking advantage" are pervasive micro-aggressions that ultimately lead to poorer treatment and access to health care for racialized clients. We must reflect on our communication skills and ensure we are not using oppressive language in our workplace.

Rationale: RN1 is very clear in identifying the communication as racist but also doing so in a respectful way. Even RN1's language is inclusive regarding group responsibility when referring to "our" workplace.

Key Takeaways

- It is essential to embody an anti-racist approach to communication.
- This often begins with self-reflection and consideration of other peoples' perspectives.
- This approach involves changing attitudes, beliefs, practices, and policies to dismantle systemic hierarchy and oppressive power.
- As a health professional, you must acknowledge and work to address power inequities and systemic bias predicated on race and unearned privilege afforded to non-racialized individuals.

Exercises

After reading the case study on the anti-racism approach to communication, reflect on the following questions:

1. Have you used or overheard racist language?
2. How would you feel if you overheard this conversation?
3. Would you say something if you overheard a similar conversation in your work environment? If yes, why? If not, why?
4. What steps need to be taken to eliminate racist language in health environments?

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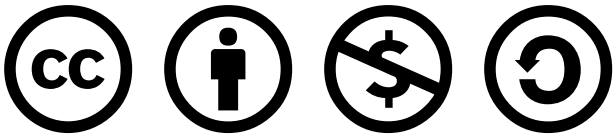
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6.4 The Interview

Learning Objectives

- Distinguish between primary and secondary sources of data collection.
- Distinguish between subjective and objective data.
- Identify examples of subjective and objective methods of data collection.

The client interview is essential to client care and involves several sources. It involves communicating with the client, considered the primary source, to collect **subjective data** (i.e., information that the client shares with you or the client's family or friends. Including statements, feelings and experiences). The client interview may also collect **secondary data** from family, friends, care partners**,** and other healthcare providers. It is part of your assessment in which you learn about the client and combine these collected data with **objective data** (factual information collected through observation, measurement, and diagnostic procedures).

As a health professional, you must ensure that professional standards of practice inform the client interview because therapeutic communication and relationships are the foundation of an effective client interview. To meet this standard, you must think carefully about communicating during the client interview.

The importance of effective communication cannot be overstated. It is a foundational pillar of an effective interview. The interview often serves as the impetus for therapeutic action. For example, it would be challenging to interpret what is wrong or ailing the client without their disclosure. The care provided by health professionals is contingent on the accuracy of the data they collect, so you must develop relational skills to accurately and holistically gather valuable data from clients. If data are lacking, health professionals are limited in providing effective care. For example, clients may not share certain problems if they are unsure whether you care or are interested. Also, clients may be afraid to reveal

relevant health information because they fear judgment or ridicule, which could impede your ability to address their health issues.

The interview's purpose influences the nature of the interview. For example, an interview may be short, focused, or more detailed and comprehensive, depending on the client's health needs and reason for seeking care. The interview purpose is often influenced by where you work, such as at a clinic or acute or primary care setting. No matter the purpose, there are common principles and strategies to incorporate when conducting the interview, as detailed in the upcoming sections.

Activity: Check Your Understanding



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https://openbooks.macewan.ca/professionalcommunication/?p=171#h5p-42



An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=171#h5p-43

Points of Consideration

Care partners

The term *care partners* refer to family, friends, or paid companions who are involved in helping to care for the client. They may be called informal caregivers or family caregivers, but care partners is a more inclusive term that acknowledges their role's energy, work, and importance.

Key Takeaways

- The client interview is an important component of client care and involves several sources.
- The client is considered the primary source of data.
- Family, friends, care partners, or healthcare team members are secondary data sources.
- Data collected from the client is considered subjective data.
- Data collected through observation, examination, or procedures are considered objective data.

Exercises

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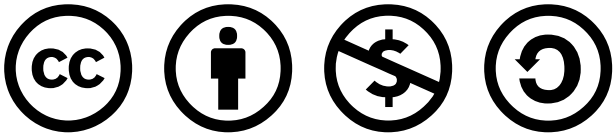
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6.5 Preparing for the Interview

Learning Objectives

- Explain why health professionals review client charts or histories.
- Describe the environmental principles of a client interview.

Reviewing the client's existing health record or chart (if applicable) provides a general overview of the client's primary health needs, the reason for seeking care, and health history. If the client is admitted, this review will give you an overview of the health history and any events of the last 24 hours. This is an important first step for several reasons:

- conveys your interest and competence as a provider,
- allows you to follow up on missing data,
- saves the client from repetition,
- allows you to identify any changes in the client's health status

You should also consider how to leverage the environment of the interview location and your position within the space. The client interview is often conducted in clinics, hospitals, emergency departments, and community spaces such as the client's home. You should attend to the following principles:

- **Create a quiet location** so you and the client can hear and communicate. Some possible strategies to reduce sound may include closing the room door, closing the curtains, and turning off radios and televisions.
- **Establish a welcoming environment**, which may include offering the client a place to sit and avoiding physical barriers, such as a desk, between you and the client.
- **Attend to the client's physical comfort**, including offering them a drink of

water and inviting them to take their coat off or have a place to put their bag or purse. Additionally, if they are in bed, you should ensure that they are comfortable and ask if they want to sit up if they are permitted.

- **Create an inclusive space** in which care partners are invited to be part of the interview based on the client's wishes.
- **Ensure a private space** so the client feels comfortable sharing personal information and knows this information is confidential. Sometimes it will not be possible to ensure a completely private space, such as when a curtain is the only barrier. In this case, try to avoid using the client's name and other client information loudly so that others cannot overhear.
- **Maintaining professional boundaries and standards of practice** facilitates a trusting and therapeutic relationship between nurse and client
- **You must understand your professional role** and ensure that your relationship with the client does not become personal (e.g., meeting the client outside work hours, disclosing personal information, or accepting or exchanging gifts) (Alberta College of Social Workers, 2019; College of Nurses of Ontario [CNO], 2019b).

In preparation for the client interview, you must first be aware of provincial or federal legislation and provincial practice standards concerning privacy and confidentiality. Each province's Personal Health Information Protection Act includes statements about clients having the right to keep their health information private. Healthcare professionals are legally required to keep this information confidential. You must emphasize that client data is kept confidential and only shared with relevant healthcare team members directly involved in the client's care. You may want to re-emphasize confidentiality when addressing sensitive interview topics such as trauma and violence, sexual health, and substance use. The client owns their personal health information; as a custodian of this information, you must request permission before the disclosure (Alberta Government, 2022b; CNO, 2019a). However, there are certain situations where consent for disclosure is not required, for example, "to eliminate or reduce a significant risk of harm to a person" (CNO, 2019a, p. 7).

Activity: Check Your Understanding

An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=636#h5p-44

Points of Consideration

Abuse and Neglect

In certain conditions, health professionals must disclose personal health information. You are legally required to report suspected child abuse or neglect and elder abuse when the person lives in a retirement or long-term care home in Canada. Each province has agencies through which child abuse is to be reported. In Alberta, the Child, Youth, and Family Enhancement Act requires individuals to report a concern if they believe a child is at risk (Alberta Government, 2022a). In Ontario, for a resident in a retirement home, you must report to the Registrar of the Retirement Homes Regulatory Authority. A resident in a long-term care home reports to the Director at the Ministry of Health and Long-Term Care (Community Legal Education Ontario, 2019).

In all provinces and territories, the relevant Protection of Persons in Care Act applies (for example, Alberta Government, 2022b). Each profession, province, and territory has a standard for reporting if a client discloses or you observe a "health professional who poses a serious risk of harm to patients" (sexual abuse, incompetent care, physical or mental incapacity to provide safe care or professional misconduct). Review the standard for your profession, province, or territory to know your legal responsibilities.

Key Takeaways

- The health history is an essential first step in understanding your client.
- It is important to consider the environment before conducting a client interview.
- Confidentiality of information is essential to a client interview, but in the case of suspected abuse or neglect, health professionals must report these offences.

Exercises

1. Reflect on how you will prepare for your next client interview.

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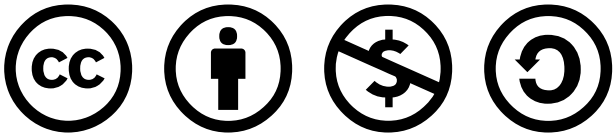
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6.6 Self-Reflection and Mindfulness Prior to the Interview

Learning Objectives

- Define self-reflection.
- Explain the relevance of self-reflection before a client interview.
- Explain how your emotions and thought might enhance an effective client interview.
- Explain how your emotions and thought might detract from an effective client interview.
- Explain how mindfulness may aid in making better and stronger connections with clients.

Health professionals are susceptible to stress, sadness, anger, and many other emotions. Despite good intentions, your communication will strongly influence your mood, thoughts, emotions, and experience. **Self-reflection** is essential for recognizing your emotional state and minimizing unintentional miscommunication with clients, i.e., ineffective or nontherapeutic communication.

Some strategies for self-reflection before commencing the client interview are shown below.

Reflective Practice	Consideration
How are you feeling?	We are not exempt from life circumstances that can cause uncomfortable emotions such as sadness, anger, and frustration and other emotions such as happiness and gratitude. While it may be impossible to put aside your emotions, having a sense of your emotions and their cause is a very powerful tool to avoid inadvertent miscommunication.
What is occupying your thoughts?	It can be helpful to step outside of the narrative in your mind. It is not abnormal for specific thoughts to pervade your thinking, but suspending such thoughts and being completely present in the moment with the client can assist with better communication. Consider if something is weighing on you. Are you ruminating about an event, a person, or an idea?
In what ways are you physically expressing your emotions and thoughts?	Your emotions and thoughts are sometimes physically expressed through nonverbal communication, such as facial expressions, hand gestures, and body language. Can someone tell that you are happy or sad by looking at you? Awareness of the physical expression of your emotions and thoughts can assist you in communicating with others and enable you to convey emotions such as empathy, compassion, and concern.
How is your health and well-being?	Often physiological and psychological or emotional events such as hunger, fatigue, body aches, and sadness can shape your mood. Reflect on how you feel in relation to your body and mind, and pay attention to your body's cues.
What is the environment surrounding you?	Subtle triggers can affect your communication ability even when you are accustomed to the work environment. A beeping machine, foul smell, or bright lights may affect your ability to focus, show concern, and actively listen. Reflect on yourself in relation to the environment and consider what factors you can and cannot control.

As you self-reflect, consider that the environment often intensifies emotions for clients and their families. It can be a place where people experience fear, physical and psychological pain, discomfort, loss, grief, and stress. Clients may hear bad news and confront truths about themselves or experience intense joy and relief. Because such extremes can exist in health care, the client is often more attuned to you than you may know. The client may be telegraphing your body language or intuiting your choice of words. For this reason, health professionals need to be self-aware and temporarily suspend their needs to connect with the client authentically.

Mindfulness

Mindfulness can be a valuable strategy for connecting with clients and authentically being fully in the moment as they respond. Getting caught up in a fast-paced environment and distracted by preceding events is easy. Clients pick up on distractions, and this can undermine trust.

Mindful meditation has been proven to reduce stress among health professionals. Once learned, it can be used anytime and improve therapeutic communication with the client. Most mindful awareness is attending to what is happening around you more deeply. Let us start by thinking about awareness as a general concept. Awareness involves recognizing or understanding an idea or phenomenon. For example, take a second and think about your breathing. Most of the time, we are unaware of our breathing because our body is designed to perform this activity for us unconsciously. We do not have to remind ourselves to breathe in and out with every breath. If we did, we would never be able to sleep or do anything else. However, if you take a second and focus on your breathing, you are consciously aware of your breathing. Most breathing exercises, whether for relaxing, stress reduction, or meditation, are designed to make you aware of your breath since we are not conscious of our breathing most of the time.
Mindful awareness takes being aware to a different level. Go back to our breathing example. Take a second and focus again on your breathing. Now ask yourself a few questions:

- How do you physically feel while breathing? Why?
- What are you thinking about while breathing?
- What emotions do you experience while breathing?

Mindful awareness aims to be consciously aware of your physical presence, cognitive processes, and emotional state while engaged in an activity. More importantly, it is not about judging these but about awareness and noticing.

Mindful Practice

Mindful practice is the conscious development of skills such as the greater ability to direct and sustain our attention, less reactivity, greater discernment and compassion, and enhanced capacity to disidentify from one's concept of self (Shapiro & Carlson, 2017).

Attention

Attention involves attending fully to the present moment instead of letting ourselves become preoccupied with the past or future (Shapiro et al., 2014). Attention is being aware of what is happening internally and externally moment-to-moment. Internally, we are talking about what is going on in our heads. What are your thoughts and feelings? Externally, we are referring to what is happening in the physical environment. To be mindful, someone must be able to focus on the here and now. Unfortunately, humans are not very good at being attentive. Our minds tend to wander about 47 % of the time (Killingsworth & Gilbert, 2010). Some people say that humans suffer from a "monkey mind," or the tendency of our thoughts to swing from one idea to the next (Shapiro et al., 2014). As such, being mindful is partially being aware of when our minds shift to other ideas and then being able to refocus ourselves.

Intention

Intention involves knowing *why* we do what we do: our ultimate aim, vision, and aspiration. So the second step in mindful practice is knowing why you are doing something. Let us say that you have decided that you want to start exercising more. If you want to engage in a more mindful practice of exercise, the first step would be figuring out why you want to exercise and what your goals are. Do you want to exercise because you know you need to be healthier? Are you exercising because you are worried about having a heart attack? Are you exercising because you want to get a bikini body before the summer? Again, the goal here is simple: be honest about our intentions.

Attitude

Attitude, or how we pay attention, enables us to stay open, kind, and curious. Essentially, we can all bring different perspectives when attending to something. For example, attention can be cold and critical or openhearted, curious, and compassionate. As you can see, we can approach being mindful from different vantage points, so the attitude with which you practice paying attention and being present is crucial (Kabat-Zinn, 1990). One of the facets of mindfulness is being open and nonjudging, so having a cold, critical quality is antithetical to being mindful. Instead, the goal of mindfulness must be one of openness and nonjudgment.

So, what types of attitudes should one develop to be mindful? Fogel (n.d) proposed the acronym COAL when thinking about our attitudes: curiosity, openness, acceptance, and love.

C stands for **curiosity** (inquiring without being judgmental).

O stands for **openness** (having the freedom to experience what is occurring as simply the truth, without judgments).

A stands for **acceptance** (taking as a given the reality of and the need to be precisely where you are).

L stands for **love** (being kind, compassionate, and empathetic to others and to yourself).

(Seigel, 2007; Fogel, n.d.)

Kabat-Zinn (1990), on the other hand, recommends seven specific attitudes that are necessary for mindfulness:

1. **Nonjudging:** observing without categorizing or evaluating.
2. **Patience:** accepting and tolerating things happening in their own time.
3. **Beginner's-Mind:** seeing everything as if for the very first time.
4. **Trust:** believing in ourselves, our experiences, and our feelings.
5. **Non-striving:** being in the moment without specific goals.
6. **Acceptance:** seeing things as they are without judgment.
7. **Letting Go:** allowing things to be as they are and getting bogged down by

things we cannot change.

Neither Seigel's (2007), Fogel's (n.d) COAL, nor Kabat-Zinn's (1990) seven attitudes are an exhaustive list of attitudes that can be important to mindfulness. Still, they give you a representative idea of the attitudes that can impact mindfulness. Ultimately, our attitude to mindfulness will largely determine its long-term value. This is why consciously cultivating certain attitudes can be very helpful … keeping particular attitudes in mind is part of the training (Kabat-Zinn, 1990).

Five Facets of Mindfulness

From a social scientific point-of-view, one of the most influential researchers in the field of mindfulness has been Ruth Baer. Baer's most significant contribution to the field has been her Five Facet Mindfulness Questionnaire. Dr. Baer's research concluded that mindfulness has five different facets: Observing, describing, acting with awareness, nonjudging of inner experience, and nonreactivity to inner experience (Baer, R. A., et al., 2006).

Observing

The first facet of mindfulness is **observing**, noticing, or attending to various internal or external phenomena (e.g., bodily sensations, cognitions, emotions, and sounds) (Sauer & Baer, 2010). When one is engaged in mindfulness, one of the basic goals is to be aware of what is happening inside yourself and in the external environment. Admittedly, staying in the moment and observing can be difficult because our minds always try to shift to new topics and ideas (again, that darn monkey brain).

Describing

The second facet of mindfulness is **describing** or putting into words observations of inner experiences of perceptions, thoughts, feelings, sensations, and emotions (Sorensen et al., 2018). The goal of describing is to stay in the moment by being

detail-focused on what is occurring. We should note that having a strong vocabulary does make describing what is occurring much easier.

Acting with Awareness

The third facet of mindfulness is **acting with awareness** or engaging fully in one's present activity rather than functioning on automatic pilot (Sauer & Baer, 2010). When acting with awareness, focusing one's attention purposefully is essential. In our day-to-day lives, we often engage in behaviours without being consciously aware of our actions. For example, have you ever thought about your morning routine? Most of us have a pretty specific ritual we use in the morning (the steps we engage in as we get ready in the morning). Still, most of us do this on autopilot without really taking the time to realize how ritualized this behaviour is.

Nonjudging of Inner Experience

The fourth facet of mindfulness is **nonjudging** of inner experience, which involves being consciously aware of one's thoughts, feelings, and attitudes without judging them. One of the hardest things for people regarding mindfulness is not judging themselves or their inner experiences. As humans, we are pretty judgmental and like to evaluate most things as positive or negative, good or bad, and so on. However, one of the goals of mindfulness is to be present and aware. As soon as you start judging your thoughts, feelings, and attitudes, you stop being present and become focused on your evaluations and not your experiences.

Nonreactivity to Inner Experience

The last facet of mindfulness is **nonreactivity to inner experience.** Nonreactivity is about becoming consciously aware of distressing thoughts, emotions, and mental images without automatically responding to them (Galla et al., 2020, p. 351). Nonreactivity to inner experience is related to the issue of not judging your inner experience, but the difference is in our reaction. Nonreactivity involves taking a step back and evaluating things from a logical, dispassionate perspective. Often

we get so bogged down in our thoughts, emotions, and mental images that we end up preventing ourselves from engaging in life. For example, one common phenomenon that plagues many people is impostor syndrome or perceived intellectual phoniness (Clance & Imes, 1978). Some otherwise brilliant and skilled people start to believe they are frauds and are just minutes away from being found out. Imagine being a brilliant brain surgeon but always afraid someone will figure out that you do not know what you are doing. Nonreactivity to our inner experience would involve realizing that we have these thoughts but not letting them influence our actual behaviours. Admittedly, nonreactivity to inner experience is easier described than done for many of us.

Key Takeaways

- Recognizing your emotional state and minimizing unintentional miscommunication is a key component of self-reflecting before a client interview.
- Mindful practice involves three specific behaviours: attention (awareness of what is happening internally and externally, moment-to-moment), and intention.
  (being aware of why you are doing something), and attitude (being curious, open, and nonjudgmental).
- The five facets of mindfulness are (1) observing (being aware of what is going on inside yourself and in the external environment), (2) describing.
  (being detail-focused on what is occurring while putting it into words), (3) acting with awareness (purposefully focusing one's attention on the activity or interaction in which one is engaged), (4) nonjudging of inner experience (being consciously aware of one's thoughts, feelings, and attitudes without judging them), and (5) nonreactivity to inner experience (taking a step back and evaluating things from a more logical, dispassionate perspective).
- Mindful communication is interacting with others while engaging in mindful awareness and practice. So much of what we do when we interact with people today centers around our ability to be mindful in the moment with others. As such, examining how to be more mindful in our communication
  with others is essential to competent communication.

Exercises

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=638#oembed-1

Video Transcript (see Appendix B 6.6)

1. Complete the mindfulness exercise in the *Hope in Work* video and reflect on the following:
    - What emotions did you feel during the exercise?
    - Were you able to remain present throughout the exercise? If not, why?
    - How can you incorporate mindfulness into your professional practice?
2. Consider how the five facets of mindfulness have the potential to impact a client interview.

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6.7 Beginning the Interview

Learning Objectives

- Explain why an effective introduction is so important to establishing a positive relationship with the client.
- Identify the elements of an effective introduction to an interview or encounter.
- Practice an interview or encounter introduction.

There is a standard way to begin interviews or encounters so the client knows who you are and why you are there.

Introducing Yourself and Addressing the Client

Begin by introducing yourself by name and category to the client, and determine how the client wants to be addressed (College of Nurses of Ontario, 2019). Best practice has shifted to include your pronouns and ask which pronouns the client uses to create an inclusive environment. For example, a health professional may say, “Hello, I am Mac Li Ken Ji. I am a speech-language pathologist. Please call me Mac. My pronouns are he/him. How would you like me to refer to you, and what pronouns do you use?” It is important not to use “preference” when referring to pronouns and gender, as these are not preferences.

As a health studies student, you should identify your category based on your institutional requirements. For example, you may consider identifying the year of your program (e.g., speech-language student Year One, nursing student Year Two) and with whom you are working.

Identifying the Purpose of the Encounter

Part of the introduction phase of the client interview or encounter is to identify your role, which involves the purpose of the encounter. You should also notify the client that any information collected will be kept confidential and, if applicable, identify with whom the client's information will be shared. Health professionals often let clients know that they will also be taking notes.

Here are some examples:

Example 1: I want to interview you about your illness. It will take about 10 minutes and begin with me asking you how you feel. Is that okay? [client: yes]. I also want to let you know everything you share will be kept confidential between myself and the healthcare team involved in your care, including the physicians, speech-language therapists, dieticians, social workers and physiotherapists. [client: okay]. Please note that I will be taking notes as we talk, and I will ask you questions that help me understand your health concerns and how best to care for you today. If you have any questions, feel free to ask at any time.

Example 2: You came into the clinic because you noticed a decline in your hearing. Before the audiologist comes in, I want to ask you a few questions about your hearing. It will take about 10 minutes. Is that okay? [client: yes]. I also want to let you know everything you share will be kept confidential between myself and the healthcare team involved in your care, including myself and the audiologist. [client: okay]. Please note that I will be taking notes as we talk, and I will ask you questions that help me understand how you are feeling, your health concerns, and how best to care for you today. Please stop me and ask if you have any questions.

Watch: Videos

The following short videos demonstrate effective and ineffective introductions to the patient interview (consider sharing your gender pronouns with the client and asking what pronouns they use).

Effective Interview Introduction

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=641

Video Transcript (see Appendix B 6.7.1)

Ineffective Interview Introduction

One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=641

Video Transcript (see Appendix B 6.7.2)

Key Takeaways

- There is a standard way to begin interviews or encounters so the client knows who you are and why you are there.
- Introduce yourself by name and category to the client, and determine how the client wants to be addressed.
- Ensure the client understands the purpose of the interview as well as your purpose and role in the interview or encounter.

Exercises

After watching both videos, review the following questions:

1. What contributed to the effective introduction in the first video?
2. What contributed to the ineffective introduction in the second video?

3. Write an introduction for an interview or encounter with a client in your practice area.
4. Practice verbalizing your introduction and reflect on the following:
    - How did you feel during the introduction?
    - What felt natural?
    - What felt awkward?

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Media Attributions

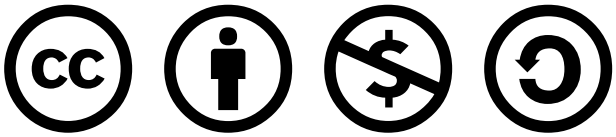
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6.8 Types of Interview Questions

Learning Objectives

- Define closed-ended questions.
- Define open-ended questions.
- Define probing questions.
- Explain the purpose of each type of interview question.

Types of Interviewing Questions

Three types of questions guide the client interview:

- closed-ended questions
- open-ended questions
- probing questions

Closed-ended questions are direct questions you ask when seeking precise information. These questions typically generate a yes or no response or a short answer and do not facilitate a dialogue. Here are some examples in which the answers are typically one word:

- Do you smoke?
- Have you been tested for tuberculosis?
- Do you take the medication as directed?
- You said the pain started last week. Is that correct?

Closed questions are effective for clients who have difficulty with verbal communication. A head nod or thumb up, thumb down approach can be used with closed questions to enhance client autonomy further while communicating.

Open-ended questions invite the client to share descriptive answers, open up about their experience, and answer in a way that is most relevant or comfortable from their perspective. In response to open-ended questions, clients typically talk in sentences and may even tell stories (in contrast to the short answers to closed-ended questions). Although clients may provide a short answer, this question allows you to probe further. Here are some examples:

- What was going on in your life when you first started feeling depressed?
- How have you been feeling in the past week?
- What are the challenges you are having with your medication regimen?

You should listen to the answer carefully to authentically respond to what the client said and possibly probe further.

Probing questions are types of questions and statements that allow you to gather more subjective data based on a client's response. These questions can also summarize and clarify a client's response or resolve discrepancies you identify. These questions and statements can be open- or closed-ended. Here are some examples:

- Tell me more.
- Tell me how that affected you.
- You said you have been doing well since your partner's death, but I noticed you are teary-eyed as you speak about them. Please talk a bit about that.

Activity: Check Your Understanding

Complete the following drag-and-drop exercise.

An interactive H5P element has been excluded from this version of the text. You can view it online here: *https://openbooks.macewan.ca/professionalcommunication/?p=651#h5p-13*

Points of Consideration

Learning How to Respond

Sometimes you will not know how to respond when a client says something. For example, they may say something that you do not understand or something that surprises you or takes you off guard. You may consider responding with statements like, "Tell me more" or "Tell me more about what you mean by that." Avoid statements that may conjure judgment, such as "Why?" or "How come?." These statements can be interpreted as a demand for an explanation, making the client feel judged and defensive.

Key Takeaways

- Closed questions are designed to elicit information quickly. These questions are effective to use with clients experiencing difficulty with verbal communication.
- Open-ended questions are designed to initiate communication and keep the client talking. These questions can enhance understanding of the client's lived experience with their health care journey.
- Probing questions can be used to acquire additional subjective data from a client.
- Avoid judgmental questions that begin with "Why?" and "How come?"

Exercises

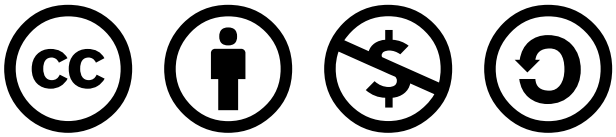
1. Consider the type of interview question that would be most appropriate to use:
    - a client who is short of breath
    - a client who is embarrassed due to a sensitive health issue
    - a client who is having chest pain
    - a client experiencing grief and loss
    - a client who is reluctant to share their story
    - a client who stopped talking due to becoming emotional

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6.9 Therapeutic Communication Techniques

Learning Objectives

- Define therapeutic communication.
- Differentiate between therapeutic and nontherapeutic communication techniques.

Therapeutic Communication

Therapeutic communication is at the foundation of the health professional–client relationship. It differs from conversations with friends, peers, family, and colleagues. Therapeutic communication has a specific purpose within the healthcare context. It is intended to develop an effective interpersonal health professional–client relationship that supports the client's well-being and ensures holistic, client-centred, quality care (Kwame & Petrucka, 2021).

The word "therapeutic" is related to the word therapy: it means having a restorative and healing effect on the mind and body and doing no harm. It is essential to consider how you communicate and how this affects the client.

The following example shows how a health professional student can effectively use therapeutic communication.



Figure 6.9.1. Therapeutic communication.

Ms. Z. is a health professional student who enjoys interacting with clients in an acute care environment. When she goes to their rooms, she greets them and introduces herself and her role calmly. She kindly asks clients about their illness experiences and notices their reactions. She does her best to provide a safe space to build trust and enhance recovery (Xue & Heffernan, 2021. She treats clients professionally by respecting boundaries and listening to them nonjudgmentally. She addresses communication barriers and respects clients' personal and cultural beliefs. She notices clients' health literacy and ensures they understand her messages and client education. As a result, clients trust her and feel as if she cares about them, so they feel comfortable sharing their healthcare needs with her (Abdolrahimi et al., 2017)

Active Listening and Attending Behaviours

As discussed previously, listening is an essential part of communication. The three main listening types are competitive, passive, and active. Competitive listening happens when we are focused on sharing our point of view instead of listening to someone else. Passive listening occurs when we are not interested in listening to

the other person and assume we understand what the person is communicating correctly without verifying. During active listening, we communicate verbally and nonverbally that we are interested in what the other person is saying while verifying our understanding with the speaker. Active listening is essential to facilitate your understanding of and the integration of clients' experiences, preferences, and health goals into their care. You might show that you are an active listener by eye contact and open posture. You can also use facilitation strategies that show active listening and encourage the client to elaborate, such as nodding and responding by saying "uh huh," "tell me more," or restating what the client said and then verifying if our understanding is correct. This feedback process is the main difference between passive listening and active listening.

Therapeutic Communication Techniques

Therapeutic communication techniques are specific methods to provide clients with support and information while focusing on their concerns. Health professionals assist clients in setting goals and selecting strategies for their care plan based on their needs, values, skills, and abilities. It is essential to recognize the client's autonomy to make decisions, maintain a nonjudgmental attitude, and avoid interrupting. Depending on the developmental stage and educational needs of the client, appropriate terminology should be used to promote client understanding and rapport. When using therapeutic techniques, health professionals often ask open-ended statements and questions, repeat information, or use silence to prompt clients to work through problems independently; a variety of such techniques are described below (American Nurse, 2023).

Clear and Simple Language

Avoiding or limiting medical and professional language clients may not understand is best. Remember, knowledge is power; using language others may not understand reinforces subordination and exclusion. By speaking simply and clearly, you include clients regardless of their professional or educational point of reference.

Use of a Broad Opening Remark

This gives the patient the freedom to choose what he/she wishes to talk about, for example, “Please tell me more about yourself.”

Open-Ended Questions

This type of question allows the patient to discuss their views. In this way, what the patient sees as essential, their intellectual capacity, and how well-orientated they become apparent. This encourages the patient to say more and does not limit answers to yes or no. There are two techniques you can use. Open-ended questions begin with who, what, when, where, and how. Probing questions that elicit additional information include questions that begin with “Tell me more …”

Examples:

“How did you experience the pain?”

“When did you start feeling dizzy?”

“Tell me more about the accident?”

Clarification

This helps the health professional to understand and the client to communicate more clearly.

Example:

“What do you mean by everybody?”

“Just to clarify, what do you mean by everybody?”

Paraphrasing

This conveys an understanding of the client's basic message.

Example:

"From what I hear you saying, the most important problem is your mobility."

"The lack of affordable housing is your main concern."

Sharing Observations

This shows that you know what is happening to the patient and encourage them to talk about it.

Example:

"I notice you limp when you walk. Are you in pain?"

Summarizing

Organizing and checking what the client said, especially after a detailed discussion. This technique indicates that a specific part of the discussion is ending and that they should do so if the client wishes to say any more.

Example:

"You went for a walk and then felt the sharp pain in your lower back, which radiated down your leg. Is that right?"

Silence

Silence is a strategy that aids active listening. It can be beneficial when the client is talking about something personal or struggling to find the words they want to say. Sometimes silence can be uncomfortable, and health professionals want to fill the

void with words. It is better to show interest and understanding and give the client time to think about how they best want to say what they want. Silence also allows a health professional to observe the client. However, health professionals should avoid silences that last too long because they can make the client anxious.

Example:

If the client feels awkward about taking too much time to think, you can say, “It is ok. Take your time.”

Honesty

Be honest. Part of therapeutic communication involves being authentic and truthful. To do so, you should be straightforward with clients and compassionately talk to them. If discussing a problematic or emotionally laden topic, demonstrate compassion by sitting down, maintaining eye contact, and being aware of your vocal intonation.

Unconditional Positive Regard

Accept and respect that each client has the agency to believe and behave how they want or feel is best. You do not have to agree or approve, but your acceptance of their self-determination should not be conditional on its alignment with your beliefs or behaviours. This approach involves accepting that clients are generally doing their best. Avoid judging or blaming them for their beliefs, behaviours, or conditions. You should avoid questions that begin with “why,” as this can imply blame. For example, avoid “Why do you smoke?” You can reframe this inquiry to be positive.

Example:

“Tell me the reasons that you smoke.”

“Tell me the reasons that you exercise.”

Permission Statements

Use permission statements to open conversations that may be difficult. **Permission statements** are a combination of statements and questions that suggest to the client that an experience or feeling is expected or normal.

Examples:

“Often, children your age experience changes in their body that they have questions about.”

“Clients that have experienced your type of surgery often have questions about sex. What if any questions do you have for me?”

“Many people your age begin to experience problems with urinary incontinence. Have you had any issues?”

Ask One Question at a Time

Ask one question at a time so the client understands it, and you are more likely to receive a clear answer. You should avoid asking multiple questions at once because this can confuse clients. Here is an example: “Tell me about your support system. Your brother seems like he is a great help, right? Do you have anyone else to support you?”

Example: Instead of multiple questions, try it this way.

“Tell me about your support system?” – then, wait for an answer. You can probe with follow-up questions depending on what the client says.

Work Collaboratively

Work collaboratively with the client during the interview so that they are an active agent with self-determination. Using a relational inquiry approach and working collaboratively, you can focus on what is important to the client. Focusing on what is

important to the client involves providing information they identify as relevant. Ask the client if they are interested in learning more about a topic.

Nontherapeutic Responses

Health professionals and health professional students must be aware that certain nontherapeutic communication techniques should avoid as they do not assist in the recovery of the client and do not have any therapeutic value.

Closed Questions

These questions require only a single word when specific information is needed. If this question is used often, the client is less inclined to give the information and may interpret it as an interrogation. Closed questions begin with “Have you?” “Should you?” Would you?” or “Do you?.”

Example:

“Do you have pain in your arm?”

“Did you drive to this appointment?”

Closed-ended questions require context to be deemed appropriate. They are relevant when a client has difficulty speaking, a health professional is attending an emergency or has limited time to acquire information. Otherwise, open-ended questions should be used.

“Why” Questions

These questions demand that the client explain behaviours, feelings, or thoughts they often do not understand. These questions are often asked early in a conversation when the health professional cannot even be certain that the client wants to explain themselves to you. They also may be considered judgmental or

blaming the client based on the tone often used in conjunction with what is being asked.

Example:

“Why are you upset?”

It is better to rephrase the question as “You seem upset. What is on your mind?”

Passing Judgment

The health professional passes judgment on the client’s behaviour, thoughts, or feelings and, in doing so, places themselves in the position of an adversary or a person who knows better and more.

Example:

“As a Christian, I do not think you should terminate this pregnancy.”

Health professionals should avoid this technique and ask questions for understanding. “Tell me how you feel about terminating this pregnancy?”

Giving Advice

The health professional tells the client how they should feel, think or act. This implies that the health professional knows the correct information better than the patient. This is particularly problematic when the advice is based on limited assessment and knowledge of the patient and the situation.

Example:

“I think you must …”

Instead, health professionals should use open-ended or empathetic responses.

Defensiveness

The health professional tries to defend someone or something the client criticized. This places the nurse and the client on opposite sides and does not promote further openness on the part of the client.

Example:

“We are very short-staffed, so we cannot help everyone at the same time.”

Instead, a more therapeutic response would be, “I apologize for the wait. I know your appointment was at 3:00, and it is 4:30. You are next to see the social worker.”

Changing the Subject

Changing the subject when someone tries to communicate with you demonstrates a lack of empathy and blocks further communication. A client may interpret this as indicating that you do not care about them or what they say.

Example:

“Let’s not talk about your family problems; it is time for your walk now.”

A more therapeutic response would be, “After your walk, let’s talk more about what is going on with your family.”

Sympathy

Sympathy focuses on feeling compassion for a client’s situation from your perspective.

Example:

“I am sorry this is happening to you.”

A more therapeutic response would be an empathetic response. “This has been a difficult time for you. Tell me how you are coping?”

False Reassurance

False reassurance is when a health professional assures or comforts the client about something not based on fact. People tend to automatically respond when someone voices fear or anxiety by assuring them that everything will be okay.

"It will be okay" when a client says, "I am scared I might die."

This kind of response is not honest and does not open up communication. It is more effective and honest to say, "Tell me more."

Watch the following videos for another example of false reassurance and how to avoid it.

Watch: False Reassurance Video



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=653

Video Transcript (see Appendix B 6.9.1)

Watch: How to Avoid False Reassurance Video



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=653

Video Transcript (see Appendix B 6.9.2)

Activity: Check Your Understanding

An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=653#h5p-37

Key Takeaways

- Therapeutic communication techniques used by health professionals emphasize the importance of building trusting relationships with clients and that therapeutic healing results from health professionals' presence with clients.
- Therapeutic communication techniques are specific methods to provide clients with support and information while focusing on their concerns. Health professionals assist clients in setting goals and selecting strategies for their plan of care based on their needs, values, skills, and abilities.
- Nontherapeutic responses should be avoided, as these responses often block the client's communication of their feelings or ideas.

Exercises

Complete the following activities and reflect on what you learned and how this knowledge can be applied to your professional practice area.

1. Therapeutic Communication—Sexual Orientation:

   An interactive H5P element has been excluded from this version of the text. You can view it online here:
   https://openbooks.macewan.ca/professionalcommunication/?p=653#h5p-19

2. Therapeutic Communication—New mom with substance abuse:

An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=653#h5p-21

3. Therapeutic Communication—End of life:

An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=653#h5p-20

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Abdolrahimi, M., Ghiyasvandian, S., Zakerimoghadam, M., & Ebadi, A. (2017). Therapeutic communication in nursing students: A Walker & Avant concept analysis. *Electronic Physician, 9*(8), 4968–4977. https://doi.org/10.19082/4968

American Nurse. (2023). *Therapeutic communication techniques*. https://www.myamericannurse.com/therapeutic-communication-techniques/

Xue, W., & Heffernan, C. (2021). Therapeutic communication within the nurse-patient relationship: A concept analysis. International Journal of Nursing Practice, 27(6), e12938. https://doi.org/10.1111/ijn.12938

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Therapeutic Communication -Sexual Orientation Virtual Simulation was created by Chippewa Valley Technical College as part of the Open RN project and is licensed under CC BY 4.0.

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Figure 1.1. beautiful african nurse taking care of senior patient in wheelchair by agilemktg1. In the Public Domain.

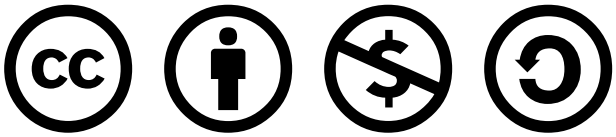
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6.10 Concluding the Interview

Learning Objective

- Explain the three purposes of a successful interview conclusion.

Concluding the interview has three main purposes:

- **First**, ensure you understand everything necessary to provide the best care for the client.
- **Second**, to ensure that the client has had the opportunity to share what is important to them and add additional information.
- And **finally**, to ensure that the client knows the next steps concerning their care. Be specific, and do not assume the client knows what to expect.

As part of the interview conclusion, you should summarize the collected data. This summary should reflect what the client said and may include paraphrasing what was said. You might start the summary by saying, “The interview is coming to a close, and I would like to share a summary of what we discussed.” The summary length will depend on the comprehensiveness of the interview and the complexity of the client’s needs but is usually a few sentences summarizing the pertinent data. This can be followed up by a couple of questions, such as “Did I capture what you said accurately?” and “Is there anything else you would like to share with me that is important to your care?”

Finally, you should discuss the next steps related to the client’s care. For example, these may include a physical assessment or having another health professional talk with them. Make sure you ask the client if they have any questions before concluding the interview. Finally, close the interview in a therapeutic way, which

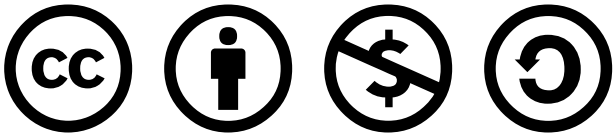
may involve using the name they prefer to be called and thanking them for sharing their information.

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CHAPTER 7: SMALL GROUP COMMUNICATION

When you think of small groups, you probably think of the much dreaded "group assignment" that you endured in high school and university. You are less likely to think of the numerous other groups to which you belong that bring more positive experiences, such as your family and friendship groups or shared-interest groups. Small groups, however, are not just entities meant to torture students; they have served a central purpose in human history and evolution. Groups make it easier for us to complete a wide variety of tasks; help us establish meaningful social bonds; and help us create, maintain, and change our sense of self (Hargie, 2011). Negative group experiences are often exacerbated by a lack of knowledge about group communication processes. We are just expected to know how to work in groups without much instruction or practice. This lack of knowledge about group communication can lead to negative group interactions, which creates a negative cycle that perpetuates further negative experiences. Fortunately, as with other areas of communication, instruction in group communication can improve people's skills and increase people's satisfaction with their group experiences. Effective small-group communication requires a range of skills and competencies, including active listening, clear and concise expression of ideas, constructive feedback, collaboration, and conflict resolution. The success of a small group depends on the ability of its members to communicate effectively and work together toward a shared objective. In this chapter, we will discuss the characteristics, functions, and types of group communication. Additionally, how groups develop and the dynamics of groups will also be explored.

References

Hargie, O. (2011). *Skilled interpersonal interaction*: *Research, theory, and practice* (5th ed.). Routledge.

7.1 Understanding Small Groups

Learning Objectives

- Define small group communication.
- Discuss the characteristics of small groups.
- Explain the functions of small groups.
- Compare and contrast types of small groups.
- Discuss the advantages and disadvantages of small groups.

Most communication skills discussed so far are directed toward ***dyadic communication*****,** which is applied in two-person interactions. While many of these skills can be transferred to and used in small group contexts, the more complex nature of group interaction necessitates some adaptation and additional skills. Small group communication refers to interactions among three or more people connected through a common purpose, mutual influence, and a shared identity. This section will learn about small group characteristics, functions, and types.

Size of Small Groups

There is no set number of members for the ideal small group. A small group requires a minimum of three people (because two people would be a pair or *dyad*), but the upper range of group size is contingent on the group's purpose. When groups grow beyond 15 to 20 members, it becomes difficult to consider them a small group based on the previous definition. An analysis of the number of unique connections between members of small groups shows that they are deceptively complex. For example, there are 15 potential dyadic connections within a six-person

group, and a twelve-person group would have 66 possible dyadic connections (Hargie, 2011).

As you can see, when the number of group members doubles, the number of connections more than doubles, which shows that network connection points in small groups grow exponentially as membership increases. So, while there is no set upper limit on the number of group members, the number of group members should be limited to those necessary to accomplish the goal or serve the group's purpose. Small groups with too many members increase the potential for group members to feel overwhelmed or disconnected.

Structure of Small Groups

Internal and external influences affect a group's structure. Regarding internal forces, member characteristics play a role in initial group formation. For instance, a person who is well informed about the group's task or highly motivated as a group member may emerge as a leader and set into motion internal decision-making processes, such as recruiting new members or assigning group roles that affect the structure of a group (Ellis & Fisher, 1994). Different members will also gravitate toward different roles within the group and advocate for specific procedures and courses of action over others. External factors such as group size, task, and resources also affect group structure. Some groups will have more control over these external factors through decision-making than others. The group structure is also formed through formal and informal network connections (Evans, 2019). Regarding formal networks, groups may have clearly defined roles and responsibilities or a hierarchy that shows how members are connected. The group may also be a part of an organizational hierarchy that networks the group into a larger organizational structure. This type of formal network is especially important in groups that report to external stakeholders. These external stakeholders may influence the group's formal network, leaving it little or no control over its structure. Conversely, groups have more control over their informal networks, which are connections between individuals within and among group members and people outside the group that are not official. For example, a group member's friend or relative may be able to secure a space to hold a fundraiser at a discounted rate, which helps the group achieve its task. Both types of networks are important because they may help

facilitate information exchange within a group and extend its reach to access other resources.

Size and structure also affect communication within a group (Ellis & Fisher, 1994). In terms of size, the more people in a group, the more issues with scheduling and coordination of communication. Remember that time is an essential resource in most group interactions and a resource that is usually strained. The structure can increase or decrease the flow of communication. Reachability refers to how one member is or is not connected to other group members. For example, the "decentralized" group structure in Figure 7.1.1 shows that each group member is connected to two others. This can make coordination easy when only one or two people need to be brought in for a decision. In this case, Erik and Callie are very reachable by Winston, who could easily coordinate with them. However, if Winston needed to coordinate with Bill or Stephanie, he would have to wait for Erik or Callie to reach that person, which could create delays. This can be a good structure for groups who are passing along a task, where each member is expected to build progressively on the others' work. A group of scholars coauthoring a research paper may work in such a manner, with each person adding to the paper and then passing it on to the next person. In this case, they can ask the previous person questions and write with the next person's area of expertise in mind.

The "centralized" group structure in Figure 7. 1.1 shows an alternative organization pattern. In this structure, Tara is very reachable by all group members. This can be helpful when Tara has the most expertise in the task or the leader who needs to review and approve work at each step before it is passed to other group members. However, Phillip and Shadow, for example, would not likely work together without Tara being involved.

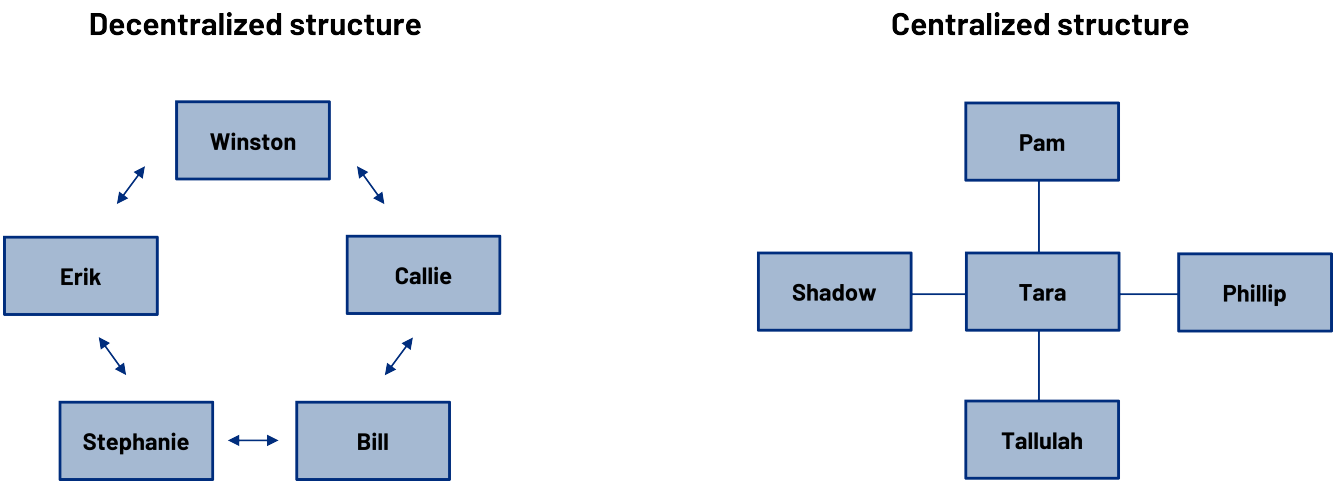


Figure 7.1.1. Two types of small group structures. Two box depictions of small groups.

When looking at the group structures, you can make some assumptions about their communication. Research has shown that centralized groups are better than decentralized groups in speed and efficiency (Ellis & Fisher, 1994). Nevertheless, decentralized groups are more effective at solving complex problems. In centralized groups, the person at the centre with the most connections is also more likely to be the group leader and may have more status among group members, mainly because that person has a broad perspective of what is happening in the group. The most central person can also act as a gatekeeper. Since this person has access to the most information, usually a sign of leadership or status, they could consciously decide to limit the flow of information.

But in complex tasks, that person could become overwhelmed by the burden of processing and sharing information with all the other group members. Decentralized structure is more likely to emerge in groups where collaboration is the goal, and a specific task and course of action are not required under time constraints. The person who initiated the group or who has the most expertise in the task may emerge as a leader in a decentralized group with a common purpose and fate (Bonito & Staggs, 2018). If the actions of one or two group members lead to a group deviating from or not achieving its purpose, then all group members are affected. Conversely, if the actions of only a few group members lead to success, then all members of the group benefit. This is a significant contributor to many university students' dislike of group assignments because they feel a loss of control and independence that they have when they complete an assignment alone. This

concern is valid in that their grades might suffer because of someone else's hostile actions, or their hard work may benefit the group that just skated by. Group meeting attendance is a clear example of the interdependent nature of group interaction. Many of us have arrived at a group meeting only to find half of the members present. Sometimes, the group members who show up have to leave and reschedule because they can not accomplish their tasks without the other members present. Group members who attend meetings but withdraw or do not participate can derail group progress. Although it can be frustrating to have your job, grade, or reputation partially dependent on the actions of others, the interdependent nature of groups can also lead to higher-quality performance and output, especially when group members are accountable for their actions.

Shared Identity

The shared identity of a group manifests in several ways. Groups may have official charters or mission and vision statements that lay out the identity of a group. Group identity is often formed around a shared goal and previous accomplishments, which adds dynamism to the group as it looks toward the future and back on the past to inform its present. Shared identity can also be exhibited through group names, slogans, songs, handshakes, clothing, or other symbols. At a family reunion, for example, matching t-shirts specially made for the occasion, dishes from recipes passed down from generation to generation and shared stories of family members who have passed away help establish a shared identity and social reality.

A key element of forming a shared identity within a group is the establishment of the in-group instead of the out-group (Greenaway et al., 2015). The degree to which members share in the in-group identity varies from person to person and group to group. Even within a family, some members may not attend a reunion or get as excited about the matching t-shirts as others. Shared identity also emerges as groups become cohesive, meaning they identify with and like the group's task and other group members. The presence of cohesion and a shared identity leads to building trust, which can also positively influence productivity and members' satisfaction.

Functions of Small Groups

Why do individuals join groups? Even with the challenges of group membership that individuals face, they still seek out and desire to be a part of numerous groups. Sometimes, you join a group because you need a service or access to information. You may also be drawn to a group because you admire the group or its members. Whether conscious of it or not, our identities and self-concepts are built on the groups you identify with. So, to answer the earlier question, you join groups because they help to meet instrumental, interpersonal, and identity needs.

Groups Meet Instrumental Needs

Groups have long served the instrumental needs of humans, helping with the essential elements of survival since ancient humans first evolved (Wakefield et al., 2017). Groups helped humans survive by providing security and protection through increased numbers and resource access. Today, groups are rarely such a matter of life and death, but they still serve essential instrumental functions. Labour unions, for example, pool efforts and resources to attain material security through pay increases and health benefits for their members, which protects them by providing a stable and dependable livelihood. Individual group members must also work to secure the instrumental needs of the group, creating a reciprocal relationship. Members of labour unions pay dues that help support the group's efforts. Some groups also meet our informational needs. Although they may not provide material resources, they enrich our knowledge or provide the information you can use to meet our instrumental needs. Many groups provide referrals to resources or offer advice. For example, several consumer protection and advocacy groups have been formed to offer referrals for people who have been victims of fraudulent business practices. Whether a group forms to provide services to members they could not get otherwise, advocate for changes that will affect members' lives, or provide information, many groups meet some instrumental need.

Groups Meet Interpersonal Needs

Group membership meets interpersonal needs by giving us access to inclusion, control, and support. Regarding inclusion, people have a fundamental drive to be a part of a group and create and maintain social bonds (Osborne, 2020). You have learned that humans have always lived and worked in small groups. Family and friendship groups, shared-interest groups, and activity groups give us a sense of belonging and inclusion in an in-group. People also join groups because they want to have some control over a decision-making process or to influence the outcome of a group. Being a part of a group allows people to share opinions and influence others. Conversely, some people join a group to be controlled because they do not want to be the sole decision-maker or leader and instead want to be given a role to follow. Just as you enter into interpersonal relationships because you like someone, you are drawn toward a group and their members when you are attracted to it. Groups also support others in ways that supplement our support from significant others in interpersonal relationships. Some groups, like therapy groups for survivors of sexual assault or support groups for people with cancer, exist primarily to provide emotional support. While these groups may also meet instrumental needs through connections and referrals to resources, they fulfill the interpersonal need for belonging, a central human need.

Groups Meet Identity Needs

Our affiliations are building blocks for our identities because group membership allows us to use reference groups for social comparison — in short, identifying us with some groups and characteristics and separating us from others. Some people join groups to be affiliated with people who share similar or desirable characteristics in terms of beliefs, attitudes, values, or cultural identities. For example, people may join the Native Women's Association of Canada to affiliate with others who support the diversity of all Indigenous women, girls, 2SLGBTQAI+ people, and families. Group memberships vary in how much they affect our identity, as some are more prominent than others at various times. While religious groups are too large to be considered small groups, the work people do as a part of a religious community—as a lay leader, deacon, prayer group member, or committee may have deep ties to a person's identity.

The prestige of a group can initially attract us because you want that group's identity to "rub off" on your identity. Likewise, our achievements as group members can enhance our self-esteem, add to our reputation, and allow us to create or project specific identity characteristics to engage in impression management. For example, a person may take numerous tests to become a part of Mensa, an organization for people with high IQs, not for material gain, but for the recognition or sense of achievement that the affiliation may bring. Likewise, people may join sports teams, professional organizations, and honour societies for a sense of achievement and affiliation. Such groups allow us opportunities to better ourselves by encouraging further development of skills or knowledge. For example, a person who used to play the clarinet in high school may join the community band to continue to improve their ability.

Types of Small Groups

There are many types of small groups, but the most common distinction between types of small groups is that of task-oriented and relational-oriented groups (Hargie, 2011).

Task-oriented groups are formed to solve problems, promote a cause, or generate ideas or information (McKay et al., 1995). In groups like a committee or study group, interactions and decisions are primarily evaluated based on the final product or output quality. The three main types of tasks are production, discussion, and problem-solving (Ellis & Fisher, 1994). Groups faced with production tasks are asked to produce something tangible from their group interactions, such as a report, design for a playground, musical performance, or fundraiser event. Groups faced with discussion tasks are asked to talk through something without trying to come up with a right or wrong answer. Examples of this group include clinical or community support groups or a group for new parents. Groups faced with problem-solving tasks must devise a course of action to meet a specific need. These groups also usually include a production and discussion component, but the end goal is not necessarily a tangible product or a shared social reality through discussion. Instead, the end goal is a well-thought-out idea. Task-oriented groups require honed problem-solving skills to accomplish goals, and the structure of these groups is more rigid than that of relational-oriented groups.

Relational-oriented groups are formed to promote interpersonal connections and focus on quality interactions that contribute to the well-being of group members. Decision-making is directed at strengthening or repairing relationships rather than completing discrete tasks or debating specific ideas or courses of action. All groups include task and relational elements, so it is best to consider these orientations as two ends of a continuum rather than mutually exclusive. For example, although a family unit works together daily to accomplish tasks like getting the kids ready for school, and friendship groups may plan a surprise party for one of the members, their primary and most meaningful interactions are still relational. Since other chapters in this book focus specifically on interpersonal relationships, this chapter focuses more on task-oriented groups and the dynamics that operate within these groups.

Some groups are formed based on interpersonal relationships. Our family and friends are considered primary or long-lasting groups, formed based on relationships and including significant others. These are the small groups in which interaction occurs most frequently. They form the basis of our society and our social realities. Kinship networks provide necessary support early in life and meet physiological and safety needs essential for survival. They also meet higher-order needs, such as social and self-esteem needs. When people do not interact with their biological family, whether voluntarily or involuntarily, they can establish fictive kinship networks composed of people who are not biologically related but fulfill family roles and help provide the same support.

You also interact in many secondary groups, characterized by less frequent face-to-face interactions, less emotional and relational communication, and more task-related communication than primary groups (Barker, 1991). While you are more likely to participate in secondary groups based on self-interest, your primary-group interactions are often more reciprocal or other-oriented. For example, you may join groups because of shared interests or needs.

Other groups are formed primarily to accomplish a task. Teams are task-oriented groups in which members are incredibly loyal and dedicated to the task and other group members (Larson & LaFasto, 1989). In professional contexts, the word *team* has become popularized as a means of drawing on the positive connotations of the term — connotations such as “high-spirited,” “cooperative,” and “hardworking.”

Scholars who have spent years studying highly effective teams have identified several common factors related to their success. Successful teams have:

- straightforward and inspiring shared goals
- a results-driven structure
- competent team members
- a collaborative climate
- high standards for performance
- external support and recognition
- ethical and accountable leadership

(Adler & Elmhorst, 2005)

Increasingly, small groups and teams are engaging in more virtual interaction. Virtual groups use new technologies and meet exclusively or primarily online to achieve their purpose or goal.

Virtual groups and teams are now common in academic, professional, and personal contexts. Classes meet entirely or partially online, work teams interface using a webinar or video-conferencing programs, and people connect around shared interests in various online settings. Virtual groups are popular in professional contexts because they can bring together geographically dispersed people (Ahuja & Galvin, 2003). Virtual groups also increase the possibility of the inclusion of diverse members. The ability to transcend distance means that people with diverse backgrounds and perspectives are more easily accessed than in many offline groups.

One disadvantage of virtual groups stems from technological mediation's difficulties in the relational and social dimensions of group interactions (Walther & Bunz, 2005). An essential part of coming together as a group is the socialization of group members into the desired norms of the group. Since norms are implicit, much of this information is learned through observation or conveyed informally from one group member to another. In traditional groups, group members passively acquire 50 % or more of their knowledge about group norms and procedures, meaning they observe rather than directly ask (Comer, 1991). Virtual groups experience more difficulty with this part of socialization than traditional

copresent groups do since any form of electronic mediation takes away some of the richness of face-to-face interaction.

To help overcome these challenges, members of virtual groups should be prepared to put more time and effort into building the relational dimensions of their group. Members of virtual groups need to make the social cues that guide new members' socialization more explicit than in an offline group (Ahuja & Galvin, 2003). Group members should also contribute often, even if supporting someone else's contribution because increased participation has been shown to increase liking among members of virtual groups (Walther & Bunz, 2005). Virtual group members should also try to put relational content that might otherwise be conveyed through nonverbal or contextual means into the verbal part of a message, as members who include little social content in their messages or only communicate about the group's task are more negatively evaluated. Virtual groups who do not overcome these challenges will likely struggle to meet deadlines, interact less frequently, and experience more absenteeism. What follows are some guidelines to help optimize virtual groups (Walter & Bunz, 2005):

- Get started interacting as a group as early as possible since it takes longer to build social cohesion.
- Interact frequently to stay on task and avoid having work build up.
- Start working toward completing the task while initial communication about setup, organization, and procedures occurs.
- Respond overtly to other people's messages and contributions.
- Be explicit about your reactions and thoughts since typical nonverbal expressions may not be received as easily in virtual groups as in colocated groups.
- Set deadlines and stick to them.

Advantages and Disadvantages of Small Groups

As with anything, small groups have their advantages and disadvantages. The advantages of small groups include shared decision-making, shared resources, synergy, and exposure to diversity. Most decisions that guide our country to introduce local laws and influence our family interactions are made within small

groups. In a democratic society, participation in decision-making is a key part of citizenship. Groups also help make decisions involving judgment calls that have ethical implications or potentially affect people negatively. Individuals making such high-stakes decisions in a vacuum could have negative consequences, given a lack of feedback, input, questioning, and proposals for alternatives from group interaction. Group members also help expand our social networks, which provide access to more resources. A local community-theatre group may be able to put on a production with a limited budget by drawing on these connections to get set-building supplies, props, costumes, actors, and publicity in ways that an individual could not. The increased knowledge, diverse perspectives, and access to resources that groups possess relate to another advantage of small groups — synergy.

Synergy refers to the potential for gains in performance or heightened quality of interactions when complementary members or member characteristics are added to existing ones (Larson, 2010). Because of synergy, the final group product can be better than any individual could have produced because of synergy.

Participating in groups can also increase our exposure to diversity and broaden our perspectives. Although groups vary in the diversity of their members, you can strategically choose groups that expand our diversity, or you can unintentionally end up in a diverse group. When you participate in small groups, you expand your social networks, which increases the possibility of interacting with people who have different cultural identities than ourselves. Since group members work together toward a common goal, shared identification with the task or group can give people with diverse backgrounds a sense of commonality they might not have otherwise. Even when group members share cultural identities, the diversity of experience and opinion can lead to broadened perspectives as alternative ideas are presented and opinions are challenged and defended. A favourite part of facilitating class discussions is when students with different identities and perspectives teach one another things in ways that you could not do on your own. This example brings together the potential of synergy and diversity. People who are more introverted or avoid group communication and voluntarily distance themselves from groups (or are rejected from groups) risk losing opportunities to learn more about others and themselves.

There are also disadvantages to small group interaction. Sometimes one person can be just as or more effective than a group. Consider a situation where a highly

specialized skill or knowledge is needed to accomplish something. In this situation, one knowledgeable person is probably a better fit for the task than a group of less knowledgeable people. Group interaction also tends to slow down the decision-making process. Individuals connected through a hierarchy or chain of command often work better when decisions must be made under time constraints. When group interaction does occur under time constraints, having one "point person" or leader who coordinates action and gives final approval or disapproval on ideas or suggestions for actions is best.

Group communication also presents interpersonal challenges. A common problem is coordinating and planning group meetings due to busy and conflicting schedules. Some people also struggle with the other-centeredness and self-sacrifice that some groups require. The interdependence of group members discussed earlier can also create some disadvantages. Group members may take advantage of the anonymity of a group and engage in social loafing, meaning they contribute less to the group than other members or work alone (Karau & Williams, 1993). Social loafers expect that no one will notice their behaviours or that others will pick up their slack. This potential for social loafing makes many students and professionals dread group work, especially those who tend to cover for other group members to prevent the social loafer from diminishing the group's productivity or output.

What is a Team?

Think about how you define a team. What is an example of a team working toward an achievable goal?

You probably described a team as a group of some kind. However, a team is more than just a group. When you think of all the groups you belong to, you will probably find that very few are real teams. Some will be family or friendship groups formed to meet a wide range of needs such as affection, security, support, esteem, belonging, or identity. Some may be committees whose members represent different interest groups and who meet to discuss their differing perspectives on issues of interest.

In this sense, the term "workgroup" (or "group") is often used interchangeably with

the word “team,” although a team may be thought of as a remarkably cohesive and purposeful type of work group. Distinguishing work groups or teams from more casual groupings of people can be achieved by using the following criteria. A collection of people can be defined as a work group or team if it shows most, if not all, of the following characteristics (Adair, 1983):

- A definable membership: a collection of three or more people identifiable by name or type;
- A group identity: the members think of themselves as a group;
- A sense of shared purpose: the members share some common task or goals, or interests;
- Interdependence: the members need the help of one another to accomplish the purpose for which they joined the group;
- Interaction: the members communicate with one another, influence one another, and react to one another;
- Sustainability: the team members periodically review the team’s effectiveness;
- An ability to act together.

Usually, the tasks and goals set by teams cannot be achieved by individuals working alone because of constraints on time and resources and because few individuals possess all the relevant competencies and expertise. Sports teams, healthcare teams or orchestras fit these criteria.

In contrast, many groups are less explicitly focused on an external task. In some instances, the growth and development of the group itself is its primary purpose; the process is more important than the outcome. Many groups are reasonably fluid and less formally structured than teams. In the case of work groups, an agreed and defined outcome is often regarded as a sufficient basis for practical cooperation and the development of adequate relationships. Teamwork is usually connected with project work, a feature of much work. Teamwork is particularly useful when you have to address risky, uncertain, or unfamiliar problems with a lot of choice and discretion surrounding the decision. In voluntary and unpaid work, where pay is not an incentive, teamwork can help motivate support and commitment by offering opportunities to interact socially and learn from others (Piercy & Kramer, 2017).

Notably, groups and teams are not distinct entities. Both can be pertinent in personal and organizational development and managing change.

Key Takeaways

- Small group communication refers to interactions among three or more people connected through a common purpose, mutual influence, and a shared identity. Small groups are essential academic, professional, and personal communication units.
- Several characteristics influence small groups, including size, structure, interdependence, and shared identity.
    - In terms of size, small groups must consist of at least three people, but there is no set upper limit on the number of group members. The ideal group members are the smallest number needed to competently complete the group's task or achieve the group's purpose.
    - Internal influences such as member characteristics and external factors such as the group's size, task, and access to resources affect a group's structure. A group's structure also affects how group members communicate, as some structures are more centralized and hierarchical, and others are more decentralized and equal.
    - Groups are interdependent in that they have a shared purpose and fate, meaning that each member's actions affect every other group member.
    - Groups develop a shared identity based on their task or purpose, previous accomplishments, future goals, and an identity that sets their members apart from other groups.
- Small groups serve several functions as they meet instrumental, interpersonal, and identity needs.
    - Groups meet instrumental needs, allowing us to pool resources and provide access to information to help us better survive and succeed.
    - Groups meet interpersonal needs, providing a sense of belonging (inclusion), an opportunity to participate in decision-making and influence others (control), and emotional support.
    - Groups meet identity needs, as they offer a chance to affiliate with others whom you perceive to be like us or whom you admire and would like to be associated with.
- There are various groups, including task-oriented, relational-oriented, primary, and secondary groups and teams.
    - Task-oriented groups are formed to solve problems, promote a cause, or generate ideas or information, while relational-oriented groups promote interpersonal connections. While there are elements of both in every group, the overall purpose of a group can usually be categorized as primarily task- or relational-oriented.
    - Primary groups are long-lasting, formed based on interpersonal relationships, and include family and friendship groups. Secondary groups are characterized by less frequent interaction and less emotional and relational communication than primary groups. Our communication in primary groups is more often other-oriented than in secondary groups, which is often self-oriented.
    - Teams are similar to task-oriented groups but are characterized by high loyalty and dedication to the group's task and other group members.

- Advantages of group communication include shared decision-making, shared resources, synergy, and exposure to diversity. Disadvantages of group communication include unnecessary group formation (when one person would better perform the task), difficulty coordinating schedules, and difficulty with accountability and social loafing.

Exercises

1. For each of the following examples of a small group context, indicate what you think would be the ideal size of the group and why. Also, indicate who the ideal group members would be (in terms of their occupation/study major, role, level of expertise, or other characteristics) and what structure would work best.

- a study group for this class
- a committee to decide on improving access to rural health care services
- a curriculum review for your program
- a group to advocate for more awareness of and support for abandoned animals

2. List some groups to which you have belonged that focused primarily on tasks, and then list some that focused primarily on relationships. Compare and contrast your experiences in these groups.

3. Synergy is one of the main advantages of small-group communication. Describe a time when a group you were in benefited from or failed to achieve synergy. What contributed to your success or failure?

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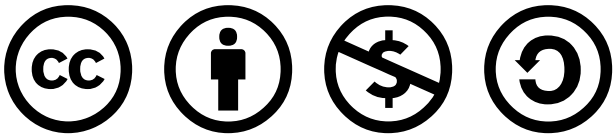
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7.2 Small Group Development

Learning Objectives

- Explain the process of group development.
- Discuss the characteristics of each stage of group development.

Small groups have to start somewhere. Even established groups change as members come and go, tasks are started and completed, and relationships change. In this section, you will learn about the stages of group development: forming, storming, norming, performing, and adjourning (Tuckman & Jensen, 1977). As with most models of communication phenomena, the order of stages is discussed separately, and they are only sometimes experienced linearly. Additionally, some groups experience only some of the five stages: some may experience multiple stages or experience more than one stage at a time.

Forming

During the **forming stage**, group members begin to reduce the uncertainty associated with new relationships or tasks through initial interactions that lay the foundation for later group dynamics (Upwork Staff, 2021). Groups return to the forming stage as group members come and go over the lifespan of a group. However, there may not be as much uncertainty when one or two new people join a group as when a group first forms; groups spend some time in the forming stage every time group membership changes.

Given that interpersonal bonds are likely yet to be formed and people are unfamiliar with the purpose of the group or task at hand, there are high levels of uncertainty. Early stages of role negotiation begin, and members start to determine goals for

the group and establish rules and norms. Group cohesion also begins to form during this stage. **Group cohesion** refers to members' commitment to the purpose of the group and the degree of attraction among individuals within the group (Hargie, 2011). The cohesion that begins in this stage sets the group on a trajectory influenced by group members' feelings about one another and their purpose or task. Groups with voluntary membership may exhibit high optimism about what the group can accomplish. Although optimism can be motivating, unrealistic expectations can lead to disappointment, making it essential for group members to balance optimism with realism. Groups with assigned or mandatory membership may include members resenting the group or its goals. These members can start the group on a hostile trajectory that will lessen or make group cohesiveness difficult.

Many factors influence how the forming stage of group development plays out. Interpersonal relationships, members' experience, determining the information required to complete the tasks and the resources available to the group contribute to creating the culture of a group (Far & Miller, 2003). Group members' diverse skill sets and access to resources can also influence the early stages of role differentiation. In terms of size, the bonding that begins in the forming stage becomes problematic when the number of people within the group prevents every person from having a one-on-one connection with every other group member.

When people outside the group decide the goal or purpose of the group, there may be less uncertainty related to the task dimensions of the group. Additionally, decisions about what roles people will play, including group leaders and other decisions about the workings of the group, may come from outside, which reduces some of the uncertainty inherent in the forming stage. Relational tension can also be diminished when group members have preexisting relationships or familiarity with each other. Although decreased uncertainty may be beneficial at this stage, too much-imposed structure from outside can create resentment or a feeling of powerlessness among group members. So a manageable amount of uncertainty is suitable for group cohesion and productivity.

Storming

During the **storming stage** of group development, conflict emerges as people begin to perform their various roles, have their ideas heard, and negotiate where they fit in the group's structure. The uncertainty present in the forming stage begins to give way as people occupy specific roles and a group's purpose, rules, and norms become clearer. Conflict develops when some group members are not satisfied with the role they or others are playing or the decisions regarding the purpose or procedures of the group. For example, if a leader begins to emerge or is assigned during the forming stage, some members may feel the leader is imposing their will on other group members. As you will learn in the section on group leadership, leaders should expect some resentment from others who want to be the leader, have interpersonal conflicts with the leader, or have general issues with being led.

Although storming and conflict have negative connotations, conflict can be positive and productive. Just as storms can replenish water supplies and grow crops, storming can lead to group growth. While conflict is inevitable and should be experienced by every group, a group that gets stuck at the storming stage will likely have little success completing its task or achieving its purpose. Influences from outside the group can also affect conflict in the storming stage. Interpersonal conflicts that predate the formation of the group may distract the group from the more productive idea- or task-oriented conflict that can be healthy for the group and increase the quality of ideas, decision-making, and output.



Figure 7.2.1. Although you may have negative connotations of storming and conflict, group conflict in this stage is necessary and productive.

Norming

During the **norming stage** of group development, the practices and expectations of the group are solidified, which leads to more stability, productivity, and cohesion within the group. Group norms are behaviours that become routine but are not explicitly taught or stated. In short, group norms help set the tone for what group members should do and how they should behave (Ellis & Fisher, 1994). Many implicit norms are derived from social norms that people follow daily. Norms within the group about politeness, lateness, and communication patterns are typically similar to those in other contexts. Sometimes a norm must be challenged because it is not working for the group, which could lead them back to the storming stage. Other times, group members challenge norms for no good reason, which can lead to punishment for the group member or create conflict within the group.

At this stage, there is a growing consensus among group members about the roles each person will play, the way group interactions will typically play out, and the direction of the group. Leaders that began to emerge generally have gained the support of other group members, and group identity begins to solidify. The group may now be recognizable by those outside as slogans, branding, or patterns of interaction become associated with the group. This stage of group development is vital for the smooth operation of the group. Norms bring a sense of predictability

and stability that can allow a group to move on to the performing stage of group development. Norms can also bring conformity pressures that can be positive or negative. People generally feel pressure to conform out of a drive to avoid being abnormal, a natural part of our social interaction (Ellis & Fisher, 1994). Too much stress can make people feel isolated and create an adverse group climate. You will learn more about pressure as a group dynamic later.

Explicit rules may also guide group interaction. Rules are explicitly stated guidelines for members and may refer to expected performance levels, output, attitudes, or dress codes. Rules may be communicated through verbal instructions, employee handbooks, membership policies, or codes of conduct (Hargie, 2011). Groups can even use procedures such as Robert's Rules of Order to manage the flow of conversation and decision-making procedures. Group members can contest or subvert group rules just as they can norms. Violations of group rules, however, typically result in more explicit punishments than violations of norms.

Performing

During the **performing stage** of group development, group members work relatively smoothly toward completing a task or achieving a purpose (Upwork Staff, 2021). Although interactions in the performing stage are task focused, the relational aspects of group interaction provide underlying support for the group members. Socialization outside official group time can serve as a relief from the group's task. During task-related interactions, group members ideally develop a synergy from pooling skills, ideas, experiences, and resources. Synergy is positive because it can lead group members to exceed their expectations and perform better than they could individually. Problems in the group's performance can lead the group back to the previous stages of group development. Changes in membership, member roles, or norms can necessitate revisiting aspects of the forming, storming, or norming stages. One way to continue to build group cohesion during the performing stage is to set short-term attainable group goals. Accomplishing something small can boost group morale, cohesion, and productivity.

Adjourning

The **adjourning stage** of group development occurs when a group dissolves because it has completed its purpose or goal, membership is declining, and support for the group no longer exists, or it is dissolved because of some other internal or external cause (Upwork Staff, 2021). Some groups may live on indefinitely and not experience the adjourning stage. Other groups may experience so much conflict in the storming stage that they skip norming and performing and dissolve before completing their task. For groups with high social cohesion, adjourning may be a challenging emotional experience. However, group members may continue interpersonal relationships even after the group dissolves. In reality, many bonds, even very close ones, fade after the group disbands. This does not mean the relationship was not genuine; interpersonal relationships often form because of proximity and shared task interaction. Friendships become difficult once that force is gone, and many fade away. For groups that had negative experiences, the adjourning stage may be welcomed.

There must be some guided and purposeful reflection to make the most out of the adjourning stage (Upwork Staff, 2021). Many groups celebrate their accomplishments with a party or ceremony. Even groups with negative experiences or who failed to achieve their purpose can still learn something through reflection in the adjourning stage that may benefit future group interactions. Often, group members leave a group experience with new or more developed skills that can be usefully applied in future group or individual contexts. Relational rather than task-focused groups can increase members' interpersonal, listening, or empathetic skills, expand cultural knowledge, and introduce new perspectives.

Key Takeaways

Small groups have to start somewhere, but their development course varies after forming based on many factors. Some groups go through each stage of development progressively and linearly, while others may get stuck in a stage, skip a stage, or experience a stage multiple times.

The five stages of group development include forming, storming, norming, performing, and adjourning.

1. During forming, group members engage in socially polite exchanges to help reduce uncertainty and gain familiarity with new members. Even though their early interactions may seem unproductive, they lay the groundwork for cohesion and other group dynamics that will play out more prominently in later stages.
2. During the storming stage, conflict emerges as group members begin to perform their various roles, have their ideas heard, and negotiate where they fit in the group's structure. Conflict is inevitable and essential as a part of group development and can be productive if appropriately managed.
3. During the norming stage, the group's practices and expectations (norms and rules) are solidified, which leads to more stability, productivity, and cohesion.
4. During the performing stage, group members work relatively smoothly toward completing a task or achieving their purpose, ideally capitalizing on the synergy that comes from the diverse experiences group members bring to the decision-making process.
5. During the adjourning stage, a group dissolves because its purpose has been met. After all, membership has declined, the group has lost support, or due to some other internal or external cause.

Exercises

1. Recall a previous or current small group to which you belong(ed). Trace the group's development using the five stages discussed in this section. Did you experience all the stages? In what order? Did you stay in some stages more than others?
2. During the norming stage of group development, interaction patterns and group expectations solidify. Recall a current or former group. What were some of the norms for the group? What were some rules? How did you become aware of each?
3. Many people need to consider the adjourning stage's importance. What is the best way to complete the adjourning stage for a successful and cohesive group? What about a group that could have been more cohesive and cohesive?

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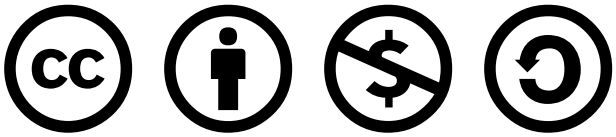
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7.3 Small Group Dynamics

Learning Objectives

- Explain the relationship between group cohesion and group climate.
- Explain the relationship between conformity and groupthink.
- Define various types of group conflict and identify strategies for managing each type.

Any time a group of people come together, new dynamics are put into place that differ from those in our typical dyadic interactions (Sidorenkov, 2013). The impressions you form about other people's likeability and the way you think about a group's purpose are affected by the climate within a group that all members create. The pressure to conform to norms becomes more powerful in group situations, and some groups take advantage of these forces with positive and negative results. Last, the potential for productive and destructive conflict increases as multiple individuals come together to accomplish a task or a purpose. This section explores previously mentioned dynamics to prepare you for future group interactions better.

Group Cohesion and Climate

When something is cohesive, it sticks together, and the cohesion within a group helps establish an overall group climate. **Group climate** refers to the relatively enduring tone and quality of group interaction that is experienced similarly by group members. There are two types of cohesion: task and social.

Task cohesion refers to the commitment of group members to the purpose and activities of the group. **Social cohesion** refers to the attraction and liking among group members (Molloy, 2020). Ideally, groups would have an appropriate balance between these two types of cohesion relative to the group's purpose, with task-

oriented groups having higher task cohesion and relational-oriented groups having higher social cohesion. Even the most task-focused groups need some social cohesion, and vice versa, but the purpose of the group and the individual members will determine the balance. For example, health studies students may join a local summer softball league because they are good friends and love the game. They may end up beating the team of faculty members from the university who joined the league to get to know each other better and have an excuse to get together in the afternoon. In this example, the health studies students exhibit high social and task cohesion, while the faculty exhibit high social but low task cohesion.

Cohesion benefits a group in many ways and can be assessed through specific group behaviours and characteristics. Groups with an appropriate level of cohesiveness:

- set goals easily;
- exhibit a high commitment to achieving the purpose of the group;
- are more productive;
- experience fewer attendance issues;
- have group members who are willing to stick with the group during times of difficulty;
- have satisfied group members who identify with, promote, and defend the group;
- have members who are willing to listen to each other and offer support and constructive criticism; and
- experience less anger and tension.

(Hargie, 2011)

Appropriate levels of group cohesion usually create a positive group climate since group climate is affected by members' satisfaction with the group. Climate has also been described as group morale. The following are some qualities that contribute to a positive group climate and morale (Marston & Hecht, 1988):

Participation. Group members feel better when they feel included in the discussion and a part of the group's functioning.

Messages. Confirming messages help build relational dimensions within a group,

and clear, organized, and relevant messages help build task dimensions within a group.

Feedback. Positive, constructive, and relevant feedback contribute to the group climate.

Equity. Aside from individual participation, group members also like to feel that participation is managed equally within the group and that appropriate turn-taking is used.

Clear and accepted roles. Group members like to know how status and hierarchy operate within a group. Understanding the roles is not enough to lead to satisfaction, though—members must also be comfortable with and accept those roles.

Motivation. Member motivation is activated by perceived connection to and relevance of the group's goals or purpose.

Group cohesion and climate are also demonstrated through symbolic convergence (Bormann, 1985). **Symbolic convergence** refers to community or group consciousness that develops through non-task-related communication, such as stories and jokes.

By reviewing and applying the concepts in this section, you can hopefully identify potential difficulties with group cohesion and work to enhance cohesion when needed to create more positive group climates and enhance future group interactions.

Group Pressures

There must be some motivating force within groups for the rules and norms to help govern and guide a group. Without such pressure, group members would have no incentive to conform to group norms or buy into the group's identity and values.

Conformity

Some people are more likely to accept norms and rules than others, which can influence the interaction and potential for conflict within a group. While some people may need social acceptance that leads them to accept a norm or rule with minimal conformity pressure, others may actively resist because of a valid disagreement or an aggressive or argumentative personality (Ellis & Fisher, 1994). Such personality traits are examples of internal pressures within the individual group member and act as a self-governing mechanism. When group members discipline themselves and monitor their behaviour, groups need not invest in as many external mechanisms to promote conformity — deviating from the group's rules and norms that a member internalized during socialization can lead to self-imposed feelings of guilt or shame that can then initiate corrective behaviours and discourage the member from going against the group.

External pressures in the form of group policies, rewards or punishments, or other forces outside of individual group members also exert conformity pressure. Regarding group policies, groups with an official admission process may have a probation period during which new members' membership is contingent on conforming to group expectations. Deviation from expectations during this "trial period" could lead to expulsion from the group. Supervisors, mentors, and other types of group leaders are also agents that can impose external pressures toward conformity. These group members often can provide positive or negative reinforcement through praise or punishment, apparent attempts to influence behaviour.

Conformity pressure can also stem from external forces when the whole group stands to receive a reward or punishment based on its performance. This ties back to the small group characteristic of interdependence. Although these pressures may seem negative, they also have positive results. Groups that exert an appropriate and ethical amount of conformity pressure typically have higher levels of group cohesion, leading to increased satisfaction with group membership, better relationships, and better task performance. Groups with a firm but healthy level of conformity also project a strong group image to those outside the group, which can raise the group's profile or reputation (Hargie, 2011). Pressures toward conformity, of course, can go too far, as is evidenced in tragic stories of people driven to suicide

because they felt they could not live up to the conformity pressure of their group and people injured or killed enduring hazing rituals that take expectations for group conformity to unethical and criminal extremes.

Groupthink

Groupthink is a negative group phenomenon characterized by a lack of critical evaluation of proposed ideas or courses of action resulting from high cohesion levels and high conformity pressures (Janis, 1972). You can better understand groupthink by examining its causes and effects. When group members fall victim to groupthink, the effect is an uncritical acceptance of decisions or suggestions for plans of action to accomplish a task or goal. Group meetings that appear to go smoothly with only positive interaction among happy, friendly people may seem ideal, but these actions may be symptomatic of groupthink (Ellis & Fisher, 1994). When people rush to agreement or fear arguments, groupthink tends to emerge.

Two primary causes of groupthink are high levels of cohesion and excessive conformity pressures. When groups exhibit high levels of social cohesion, members may be reluctant to criticize or question another group member's ideas or suggestions for fear of damaging the relationship. When group members have high task cohesion, they may feel invincible and not critically evaluate ideas. High levels of cohesion may lessen conformity pressures since group members who identify strongly with the group's members and mission may not feel a need to question the decisions or suggestions made by others. For those not blinded by high levels of cohesion, internal conformity pressures may still lead them to withhold criticism of an idea because the norm is to defer to decisions made by organization leaders or a majority of group members. External conformity pressures because of impending reward or punishment, time pressures, or an aggressive leader can also lead to groupthink.

To avoid groupthink, groups should:

- divide up responsibilities between group members so decision-making power is not in the hands of a few
- track contributions of group members in such a way that each person's input and output are recorded so that it can be discussed

- encourage and reward the expression of a minority or dissenting opinions
- allow members to submit ideas before a discussion so that opinions are not swayed by members who propose ideas early in a discussion
- question each major decision regarding its weaknesses and potential negative consequences relative to competing decisions (encourage members to play "devil's advocate")
- have decisions reviewed by an outside party that was not involved in the decision-making process.

(Hargie, 2011)

Group Conflict

Conflict can appear in indirect or direct forms within group interaction, just as in interpersonal interactions. Group members may openly question each other's ideas or express anger toward or dislike for another person. Group members may communicate indirectly in conflict through innuendo, joking, or passive-aggressive behaviour. Although you may view conflict negatively, conflict can be beneficial for many reasons. When groups get into a rut, lose creativity, or become complacent, conflict can help get a group out of a destructive or mediocre routine. Conversely, conflict can lead to lower group productivity due to strain on a group's task and social dimensions. There are three main types of conflict within groups: procedural, substantive, and interpersonal (Fujishin, 2001). Each type of conflict can vary in intensity, affecting how much it impacts the group and its members.

Procedural Conflict

Procedural conflict emerges from disagreements or trouble with the mechanics of group operations. In this type of conflict, group members differ in their beliefs about *how* something should be done. A group leader can handle procedural conflict, especially if the leader puts group procedures into place or has the individual power to change them. If there is no designated leader or the leader does not have the sole power to change procedures (or wants input from group members), proposals can

be taken from the group on addressing a procedural conflict to initiate a procedural change. A vote to reach a consensus or majority can help resolve procedural conflict.

Substantive Conflict

Substantive conflicts focus on group members' differing beliefs, attitudes, values, or ideas related to the purpose or task of the group: rather than focusing on how substantive conflicts focus on questions of what. Substantive conflicts may emerge as a group tries to determine its purpose or mission. As members figure out how to complete a task or debate which project to start next, there will undoubtedly be differences of opinion on what something means, what is acceptable in terms of supporting evidence for a proposal, or what is acceptable for a goal or performance standard. Leaders and other group members should not rush to settle this conflict. As you learned in our earlier discussion of groupthink, open discussion and debate regarding ideas and suggestions for group activities can lead to higher-quality output and may prevent groupthink. Leaders who make final decisions about substantive conflict for the sake of moving on run the risk of creating a win/lose competitive climate in which people feel like their ideas may be shot down, which could lead to less participation. Group members may want to research what other groups have done in similar situations to resolve this conflict. Additional information often provides needed context for conflict regarding information and ideas. Once the information is gathered, weigh all proposals and discover common ground among perspectives. Civil and open discussions that debate the merits of an idea are more desirable than a climate in which people feel personally judged for their ideas.

Primary and Secondary Tensions

Relevant to these types of conflict are primary and secondary tensions that emerge in every group (Bormann & Bormann, 1988). When the group first comes together, members experience **primary tension**, which is tension based on the uncertainty that is a natural part of initial interactions. Only after group members begin to "break the ice" and get to know each other can the tension be addressed, and they can proceed with the forming stage of group development. Small talk and politeness help group members manage primary tensions; there is a relatively

high threshold for these conflicts because experiences with such uncertainty when meeting people for the first time, and many of us are optimistic that a bit of time and effort will allow us to get through the tensions. Since some people are more comfortable initiating conversation than others, more extroverted group members need to include less talkative members. Intentionally or unintentionally excluding people during the negotiation of primary tensions can lead to unexpected secondary tensions later. During this stage, people are less direct in their communication, using more hedges and vague language than they will later in the group process. The indirect communication and small talk that characterize this part of group development are not a waste of time. They help manage primary tensions and lay the foundation for future interactions involving more substantive conflict.

Secondary tension emerges after groups have passed the forming stage of group development and have conflict over member roles, differing ideas, and personality conflicts. These tensions are typically evidenced by less reserved and polite behaviour than primary tensions. People also have a lower tolerance threshold for secondary tensions because rather than being an expected part of initial interaction, these conflicts can be more damaging and interfere with the group's task performance. Secondary tensions are inevitable and should not be feared or eliminated. It is not the presence or absence of secondary tension that makes a group successful; it is how it handles the tensions when they emerge. A certain level of secondary tension is tolerable, not distracting, and can enhance group performance and avoid groupthink. When secondary tensions rise above the tolerance threshold and become distracting, they should be released through direct means, such as diplomatic confrontation or indirect means, such as appropriate humour or taking a break. While primary tensions eventually disappear (at least until a new member arrives), secondary tensions will come and go and may persist for extended periods.

Managing Conflict in Small Groups

Some common ways to manage conflict include clear decision-making procedures, third-party mediation, and leader facilitation (Ellis & Fisher, 1994). The commonly used majority vote can help or hurt conflict management efforts. While an up-

and-down vote can allow a group to finalize a decision and move on, members whose vote fell on the minority side may resent other group members. This can create a win/lose climate that leads to further conflict. A leader who makes ultimate decisions can also help move a group toward completing a task, but conflict may only be pushed to the side and left not fully addressed. Third-party mediation can help move a group past a conflict. It may create fewer feelings of animosity since the person meditating and perhaps making a decision is not a group member. Sometimes, the leader can act as an internal third-party mediator to help other group members work productively through conflict.

Tips for Managing Group Conflict

1. **Clarify** the issue by getting to the historical roots of the problem. Remember that perception leads us to punctuate interactions differently, so it may be helpful to know each person's perspective of when, how, and why the conflict began.
2. **Create** a positive discussion climate by encouraging and rewarding active listening.
3. **Discuss** needs rather than solutions. Determine how each person's needs can be met and goals for the outcome of the conflict before offering or acting on potential solutions.
4. **Set boundaries** for discussion and engage in gatekeeping to prevent unproductive interactions such as tangents and personal attacks.
5. **Use "we" language** to maintain group cohesion and identity and "I" language to help reduce defensiveness.

(Ellis & Fisher, 1994)

Advantages and Disadvantages of Group Conflict

Remember that a complete lack of conflict in a group is a bad sign, as it indicates either a lack of activity or a lack of commitment on the part of the members (Ellis & Fisher, 1994). When properly handled, conflict can lead a group to understand better the issues they face. For example, substantive conflict brings voice to

alternative perspectives that may not have been heard otherwise. Additionally, when people view conflict as healthy, necessary, and productive, they can enter into a conflict episode with an open mind and an aim to learn something. This is especially true when those who initiate substantive conflict can share and defend their views competently and civilly. Group cohesion can also increase as a result of well-managed conflict. Occasional experiences of tension and unrest followed by resolutions make groups feel like they have accomplished something, which can lead them not to dread conflict and give them the confidence to deal with it the next time.

Conflict that goes on for too long or is poorly handled can lead to decreased cohesiveness. Group members who try to avoid a conflict can still feel anger or frustration when the conflict drags on. Members who consistently take task-oriented conflict personally and escalate procedural or substantive conflict to interpersonal conflict are incredibly unpopular with other group members. Mishandled or chronic conflict can eventually lead to the destruction of a group or a loss in members as people weigh the costs and rewards of membership (Ellis & Fisher, 1994). Hopefully, a skilled leader or other group members can take on conflict resolution roles to prevent these disadvantages of conflict.

Key Takeaways

- *Task cohesion* refers to the degree of commitment of group members to the purpose and activities of the group, and *social cohesion* refers to the degree of attraction and liking among group members. *Group climate* refers to the relatively enduring tone and quality of group interaction that is experienced similarly by group members. The degree of each type of cohesion affects the group's climate. Groups can be very close socially but not perform well if they do not have an appropriate level of task cohesion. Groups too focused on the task can experience interpersonal conflict or a lack of motivation if social cohesion, which helps enhance the feeling of interdependence, is lacking.
- Internal pressures influence behaviour and communication, such as an internal drive to be seen as part of the group or to avoid feeling ashamed or guilty for deviating from the group. Likewise, external pressures such as group policies and the potential for reward or punishment also play into group dynamics. The pressures toward conformity can manifest in *groupthink*, characterized by a lack of critical evaluation of proposed ideas, a high level of agreement, and fear of argument.
- Groups experience different kinds of conflict, including procedural, substantive, and interpersonal.
    - Procedural conflict emerges from disagreements or trouble with the mechanics of group operations and deals with questions about "how" a group should do something. A leader may be able to resolve this conflict by changing or explaining a procedure or taking, from group members, proposals for or votes on procedural revisions.
    - Substantive conflict focuses on group members' differing beliefs, attitudes, values, or ideas related to the purpose or task of the group. Leaders and other group members should avoid closing off this type of conflict before people can be heard, as a lack of substantive conflict can lead to groupthink. Instead, listen to all viewpoints, find common ground, and weigh and evaluate the information as a group.

Exercises

1. Group cohesion and climate are essential dynamics within a small group. Identify and then compare and contrast a current or former small group that was cohesive and one that was not cohesive, including a discussion of how the presence or lack of cohesion affected the group's climate.

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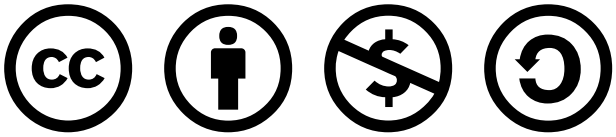
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CHAPTER 8: LEADERSHIP, FOLLOWERSHIP ROLES, AND DECISION-MAKING

Leadership is the ability to influence and guide a group of people toward a common goal or objective. It involves setting a vision, motivating and inspiring others, making decisions, and taking responsibility for the outcome of those decisions. Leadership can be demonstrated in many different contexts, such as in business, politics, education, sports, and social groups. Effective leadership requires a combination of personal qualities such as integrity, empathy, and self-awareness, as well as technical and strategic skills such as communication, problem-solving, and decision-making. Good leaders not only lead by example, but they also create a positive culture and empower their team members to achieve their full potential.

A person in the role of leader may provide good leadership. Likewise, a person who is not recognized as a “leader” by title can provide excellent leadership. In this chapter will discuss approaches to studying leadership, leadership styles, and group decision-making.

8.1 Leadership

Learning Objectives

- Explain various perspectives on how and why people become leaders.
- Explain why followership is important to leadership.
- Compare and contrast various leadership styles.
- Discuss the types of power that a leader may tap into.

Leadership is one of the most studied aspects of group communication. Scholars in business, communication, psychology, and many other fields have written extensively about leaders' qualities, leadership theories, and how to build leadership skills. It is important to note that although a group may have only one official leader, other members play essential leadership roles. This distinction also helps us differentiate between leaders and leadership (Hargie, 2011).

Why and How People Become Leaders

Throughout history, some people have grown into, taken, or been given leadership positions. Many early leaders were believed to be divine in some way. In some Indigenous cultures, shamans are considered leaders because they are believed to be bridges that can connect the spiritual and physical realms. Many early kings, queens, and military leaders were said to be approved by a god to lead the people. Today, many leaders are elected or appointed to positions of power, but most have already accumulated much experience in leadership roles. Some leaders are well respected, some are feared, some are hated, and many elicit some combination of these reactions. This brief overview illustrates the centrality of leadership throughout human history, but it was not until the last 100 years that leadership became an object of systematic study.

Before moving onto specific approaches to studying leadership, let us distinguish between designated and emergent leaders. Some people gravitate more toward leadership roles than others; some leaders are designated, while others are emergent (Hargie, 2011). **Designated leaders** are officially recognized in their leadership role and may be appointed or elected by people inside or outside the group. Designated leaders can be incredibly successful when they are sought out by others to fulfill and accepted in leadership roles. On the other hand, some people seek out leadership positions not because they possess leadership skills and have been successful leaders but because they have the drive to hold and wield power. Many groups are initially leaderless and must either designate a leader or wait for one to emerge organically. **Emergent leaders** gain status and respect through engagement with the group and its task and are turned to by others as a resource when leadership is needed. Emergent leaders may play an important role when a designated leader unexpectedly leaves. This next section will focus on three common perspectives on why some people are more likely to be designated leaders than others and how leaders emerge in the absence of or in addition to a designated leader.

Leaders Emerge Because of Their Traits

The trait approach to studying leadership distinguishes leaders from followers based on traits or personal characteristics (Pavitt, 1999). Leaders generally share traits related to physical appearance, communication ability, intelligence, and personality (Cragan & Wright, 1991). Regarding physical appearance, designated leaders tend to be taller and more attractive than other group members. This could be because you may consciously and subconsciously associate a larger size (in height and build, but not body fat) with strength and strength with good leadership. Regarding communication abilities, leaders speak more fluently, have a more confident tone, and communicate more often than other group members. Leaders are also moderately more intelligent than other group members, which is attractive because leaders need good problem-solving skills. Interestingly, group members are not as likely to designate or recognize an emergent leader that they perceive to be exceedingly more intelligent than them. Last, leaders are usually more extroverted, assertive, and persistent than other group members. These

personality traits help get these group members noticed by others, and expressivity is often seen as attractive and a sign of communication competence.

The trait approach to studying leaders has provided helpful information regarding how people view ideal leaders. Still, it has not provided much insight into why some people become and are more successful leaders than others. The list of ideal traits is not final because excellent leaders can have few, if any, of these traits, and poor leaders can possess many. Additionally, these traits are difficult to change or control without much time and effort. Because these traits are enduring, there is not much room for people to learn and develop leadership skills, which makes this approach less desirable for communication scholars who view leadership as a communication competence. Rather than viewing these traits as a guide for what to look for when choosing your next leader, view them as traits that are made meaningful through context and communication behaviours.

Leaders Emerge Because of the Situation

The emergent approach to studying leadership considers how leaders emerge in initially leaderless groups and how situational contexts affect this process (Pavitt, 1999). The situational context surrounding a group influences what type of leader is best. Situations may be highly structured, highly unstructured, or anywhere in between (Cragan & Wright, 1991). Leaders with a high task orientation are likely to emerge in highly structured contexts, such as a group that works to maintain a completely automated factory unit, and highly unstructured contexts, like a group responding to a crisis. Relational-oriented leaders are more likely to emerge in semistructured contexts that are less formal and in groups composed of people who have specific knowledge and are therefore trusted to do much of their work independently (Fiedler, 1967). For example, a group of local health and wellness business owners who form a group for professional networking would likely prefer a leader with a relational-oriented style since these group members are likely already leaders in their own right and, therefore, might resent a person who takes a rigid task-oriented style over a more collegial style.

Leaders emerge differently in different groups, but two stages are standard in each scenario (Bormann & Bormann, 1988). The first stage only covers a brief period, perhaps no longer than a portion of one meeting. During this first stage, about half

of the group's members are eliminated from the possibility of being the group's leader.

Remember that this is an informal and implicit process — unlike people being picked for a kickball team or intentionally vetted. But some communicative behaviours influence who is cut from the next stage of informal leader consideration. People will likely be eliminated as leader candidates if they do not actively contribute to initial group interactions, if they contribute but communicate poorly, if they contribute but appear too rigid or inflexible in their beliefs, or if they seem uninformed about the task of the group.

The second stage of leader emergence is where a more or less pronounced struggle for leadership begins. In one scenario, a leader candidate picks up an ally in the group who acts as a supporter or lieutenant, reinforcing the ideas and contributions of the candidate. If there are no other leader candidates or the others fail to pick up a supporter, the candidate with the supporter will likely become the leader. In a second scenario, two leader candidates pick up supporters and are both qualified leaders. This leads to a more intense and potentially prolonged struggle that can be uncomfortable for other group members. Although the two leading candidates do not overtly fight with each other or say, "I should be the leader, not you!" they both take strong stances regarding the group's purpose and try to influence the structure, procedures, and trajectory of the group. Group members not involved in this struggle may not know who to listen to, leading to low task and social cohesion and may cause a group to fail. Sometimes, one candidate-supporter team retreats, leaving a clear leader to step up. But the candidate who retreated will still enjoy a relatively high status in the group and be respected for vying for leadership. The second-place candidate may become a nuisance for the new emergent leader, questioning his or her decisions. Rather than excluding or punishing the second-place candidate, the new leader should give him or her responsibilities within the group to use the group member's respected status.

Leaders Emerge Based on Communication Skills and Competence

Leaders also emerge **based on their communication skills and competency.** This final approach to the study of leadership is considered functional because it focuses

on how particular communication behaviours function to create leadership conditions. This last approach is the most useful for communication scholars and people who want to improve their leadership skills because leadership behaviours (which are learnable and adaptable) rather than traits or situations (which are often beyond our control) are the primary focus of study. You have learned that group members can exhibit leadership behaviours and are not just designated or emergent leaders. Therefore leadership behaviours are essential for all of us to understand, even if you do not anticipate serving in leadership positions (Cragan & Wright, 1991).

The communication behaviours that facilitate effective leadership encompass three main areas of group communication, including task, procedural, and relational functions. Although any group member can perform leadership behaviours, groups usually have patterns of expectations for behaviours once they reach the norming and performing stages of group development. Many groups only meet once or twice; in these cases, a designated leader will likely perform many of the functions to get the group started and then step in to facilitate as needed.

Leadership behaviours contributing to a group's task-related functions include providing, seeking, and evaluating information. Leaders may want to be cautious about contributing ideas before soliciting ideas from group members since the leader's contribution may sway or influence others in the group, diminishing the importance of varying perspectives. Likewise, a leader may want to solicit an evaluation of ideas from members before providing their judgment. In group situations where creativity is needed to generate ideas or solutions to a problem, the task leader may be wise to facilitate brainstorming and discussion.

This can allow the leader to keep their eye on the "big picture" and challenge group members to make their ideas more concrete or discuss their implications beyond the group without adding their opinion.

To review, some of the key **leadership behaviours that contribute to the task-related functions** of a group include the following (Cragan & Wright, 1991):

- contributing ideas
- seeking ideas
- evaluating ideas

- seeking idea evaluation
- visualizing abstract ideas
- generalizing from specific ideas

Leadership behaviours contributing to a group's procedural-related functions help guide the group from idea generation to implementation. Some leaders are better at facilitating and managing ideas than managing a group's administrative functions. So while a group leader may help establish the group's goals and set the agenda, another group member with more experience in group operations may periodically revisit and assess progress toward the completion of goals and compare the group's performance against its agenda. It's also important to check in between idea-generating sessions to clarify, summarize, and gauge the agreement level of group members. A skilled and experienced leader may take primary responsibility for all these behaviours, but sharing them with group members is often beneficial to avoid being overburdened.

To review, some of the **key leadership behaviours that contribute to the procedural functions** of a group include the following (Cragan & Wright, 1991):

- Goal setting
- Agenda making
- Clarifying
- Summarizing
- Verbalizing consensus
- Generalizing from specific ideas

Leadership behaviours contributing to a group's relational functions include creating a participative and inclusive climate, establishing norms of reflection and self-analysis, and managing conflict. By encouraging participation among group members, a leader can help quell people who try to monopolize the discussion and create an overall climate of openness and equality. Leaders want to make sure that people do not feel personally judged for their ideas and that criticism remains idea-centred, not person-centred. A safe and positive climate typically leads to higher-quality idea generation and decision-making. Leaders also encourage group members to metacommunication or talk about the group's communication. This can help the group identify and address any interpersonal or communication issues

before they escalate and divert the group from accomplishing its goal. A group with a well-established participative and inclusive climate will be better prepared to handle conflict when it emerges.

To review, some of **the key leadership behaviours that contribute to the relational functions** of a group include the following (Cragan & Wright, 1991):

- Regulating participation
- Climate making
- Instigating group self-analysis
- Resolving conflict
- Instigating productive conflict

Leadership Styles

Given a large amount of research on leadership, it is not surprising that several different ways to define or categorize leadership styles exist. Influential leaders generally do not fit solely into one style in the following classifications. Instead, they can adapt their leadership style to fit the relational and situational context (Wood, 1977). One common way to study leadership style is to distinguish between autocratic, democratic, and laissez-faire leaders (Lewin et al., 1939). These leadership styles can be described as follows:

- **Autocratic leaders** set policies and make decisions primarily on their own, taking advantage of the power present in their title or status to set the agenda for the group.
- **Democratic leaders** facilitate group discussion and like to take input from all members before making a decision.
- **Laissez-faire leaders** take a "hands-off" approach, preferring to give group members the freedom to reach and implement their own decisions.

While this is a frequently cited model of leadership styles, this section will focus more on a model developed a few years after this one. The four leadership styles used in this model are directive, participative, supportive, and achievement-oriented (House & Mitchell, 1974).

Directive Leaders

Directive leaders help provide psychological structure for their group members by clearly communicating expectations, keeping a schedule and agenda, providing specific guidance as group members work toward completing their tasks and taking the lead on setting and communicating group rules and procedures. Although similar to the autocratic leadership style mentioned before, it is more nuanced and flexible. The originators of this model note that a leader can be directive without being seen as authoritarian. To do this, directive leaders must be good motivators who encourage productivity through positive reinforcement or reward rather than through the threat of punishment.

A directive leadership style is effective in groups with no history and may require direction to start their task. It can also be the most appropriate method during crises when decisions must be made under time constraints or other extraordinary pressures. When groups have an established history and are composed of people with unique skills and expertise, a directive approach may be seen as "micromanaging." In these groups, a more participative style may be the best option.

Participative Leaders

Participative leaders work to include group members in the decision-making process by soliciting and considering their opinions and suggestions. When group members feel included, their personal goals are more likely to align with the group and organization's goals, which can help productivity. This leadership style can also aid in group member socialization, as the members feel like they help to establish group norms and rules, which affects cohesion and climate. When group members participate more, they buy into the group's norms and goals more, which can increase conformity pressures for incoming group members. As you learned earlier, this is good, but it can become harmful when the pressures lead to unethical group member behaviour. In addition to consulting group members for help with decision-making, participative leaders also grant group members more freedom to work independently. This can make group members feel trusted and respected for their skills, increasing their effort and output.

The participative method of leadership is similar to the democratic style discussed earlier. It is a style of leadership practiced in many organizations that have established work groups that meet consistently over long periods.

Supportive Leaders

Supportive leaders show concern for their followers' needs and emotions. They want to support group members' welfare through a positive and friendly group climate. These leaders are good at reducing the stress and frustration of the group, which helps create a positive climate and can help increase group members' positive feelings about the task and other group members.

A supportive leadership style is more likely in primarily relational rather than task-focused groups. For example, support groups and therapy groups benefit from a supportive leader. While maintaining positive relationships is an integral part of any group's functioning, most task-oriented groups need to spend more time on tasks than on social functions to work toward the completion of their task efficiently. Skilled directive or participative leaders of task-oriented groups would be wise to employ supportive leadership behaviours when group members experience emotional stress to prevent relational stress from negatively impacting the group's climate and cohesion.

Achievement-Oriented Leaders

Achievement-oriented leaders strive for excellence and set challenging goals, constantly seeking improvement and exhibiting confidence that group members can meet their high expectations. These leaders often engage in systematic social comparison, keeping tabs on other similar high-performing groups to assess their expectations and the group's progress. This type of leadership is similar to what other scholars call transformational or visionary leadership and is often associated with leaders like former Apple CEO Steve Jobs, talk show host and television network CEO Oprah Winfrey, former U.S. president Bill Clinton, and business magnate turned philanthropist Warren Buffett. Achievement-oriented leaders are likely less common than other types, as this requires high skill and commitment

for the leader and the group. Although rare, these leaders can be found at all levels of groups ranging from local school boards to *Fortune* 500 companies. Specific group dynamics must be in place to accommodate this leadership style. Groups for which an achievement-oriented leadership style would be effective are typically intentionally created and are made up of skilled and competent members regarding the group's task. The leader is often chosen explicitly because of their reputation and expertise. Even though the group members may not have a history of working with the leader, the members and leader must have a high degree of mutual respect.

Leadership and Power

Leaders help move group members toward completing their goals using various motivational strategies. The types of power leaders draw on to motivate have long been a topic of small group study. A leader may possess or draw on the following five types of power to varying degrees: legitimate, expert, referent, information, and reward/coercive (French & Raven, 1959). Influential leaders do not need to possess all five types of power. Instead, competent leaders know how to draw on other group members who may be better able to exercise power in a given situation.

Legitimate Power

The very title of *leader* brings with it **legitimate power**, which is the power that flows from the officially recognized position, status, or title of a group member. For example, the leader of a healthcare authority receives legitimate power through their title. It is important to note that being designated as someone with status or a position of power does not mean that the group members respect or recognize that power. Even with a title, leaders must still be able to provide leadership. Of the five types of power, however, the leader alone is most likely to possess legitimate power.

Expert Power

Expert power comes from a group member's specific knowledge, skill, or expertise, while others do not. For example, even though all the Social Media Relations Department workers have computer experience, the information technology (IT) officer has expert computer networking and programming power. Because of this, even though the director may have a higher status, they must defer to the IT officer when the office network crashes. A leader with legitimate and expert power may be able to take a central role in setting the group's direction, contributing to problem-solving, and helping the group achieve its goal. A member with significant expert power may emerge as an unofficial secondary leader in groups with a designated leader who relies primarily on legitimate power.

Referent Power

Referent power comes from the group member's attractiveness, likeability, and charisma. As we learned earlier, more physically attractive and outgoing people are often chosen as leaders. This could be due to their referent power. Referent power also derives from a person's reputation. A group member may have referent power if they are well respected outside of the group for previous accomplishments or even because he or she is known as a dependable and capable group member. Like legitimate power, the fact that a person possesses referent power does not mean they have the talent, skill, or other characteristics needed to lead the group. A person could be likable without relevant knowledge about the group's task or leadership experience. Some groups desire this type of leader, mainly if the person is meant to attract external attention and serve as more of a "figurehead" than a regularly functioning group member.

Information Power

Information power comes from a person's ability to access information through informal and well-established social and professional networks. We have already learned that information networks are an essential part of a group's structure and can affect a group's access to various resources. When a group member is said to

have “know-how,” they possess information power. The knowledge may not always be official, but it helps the group solve problems and get things done. Individuals develop information power through years of interaction, making connections, and building and maintaining interpersonal and instrumental relationships.

Reward and Coercive Power

The final two types of power, reward and coercive, are related. **Reward power** comes from the ability of a group member to provide a positive incentive as a compliance-gaining strategy, and **coercive power** comes from the ability of a group member to provide a negative incentive. These two types of power can be difficult for leaders and other group members to manage because their use can lead to interpersonal conflict. Nearly any group member can use reward power if they give another group member positive feedback on an idea, an appreciation card for hard work, or a pat on the back. Because of limited resources, many leaders are frustrated by their inability to give worthwhile tangible rewards to group members, such as prizes, bonuses, or raises. Additionally, reward power may seem corny or paternalistic to some or arouse accusations of favouritism or jealousy among group members who do not receive the award.

Coercive power, since it entails punishment or negative incentives, can lead to interpersonal conflict and a hostile group climate if it is overused or misused. While any leader or group member could threaten others, leaders with legitimate power are typically in the best position to use coercive power. In such cases, coercive power may manifest in loss of pay and privileges, being excluded from the group, or being fired (if the group work is job-related). Leaders have more difficulty using coercive power in many volunteer groups or groups that lack formal rules and procedures since they cannot issue official punishments. Instead, coercive power will likely take the form of interpersonal punishments such as ignoring group members or excluding them from group activities.

The Importance of Being a Follower

As we have mentioned, effective teamwork has many benefits. However, most of

the work in teams is done by followers, and thus followership is vital to developing a strong team. According to Howell and Mendez (2008), there are three tips for being an effective follower and thus an effective team member.

Followership as an Active Role

You are encouraged to complement and support the leadership role as a team member and a follower. Followers are highly motivated to engage with their leaders to achieve organizational goals. To strengthen the team in a followership role, you are encouraged to:

- Demonstrate job-related knowledge and competence.
- Build collaborative and supportive relationships with colleagues and the leader.
- Support the leader in front of others.

Followership as an Independent Role

Followership as an independent role reflects a trend for followers to act independently of their leaders as a leader substitute. When leadership substitutes exist, leaders can focus on tasks that often go unattended, such as follower development, advocacy, and obtaining resources. Those who want to lead are well served by first endeavouring to follow. As a leader substitute, you should:

- Influence the leader in a confident and unemotional manner to help the leader avoid costly mistakes.
- Show concern for performance as well as a supportive, friendly atmosphere.

Followership as a Shifting Role

An individual's role in a team-based structure is often temporal and dependent on the requirements of a particular project or task. The same logic applies to student project teams. For example, leaders can emerge during teamwork rather than have

a professor appoint them. You may even be a follower initially and find yourself taking a leadership position later in the project. Therefore, we recommend that you:

- Monitor and interpret the environment to identify needed changes in the team.
- Actively participate in the group's decision-making while taking responsibility for achieving its goals.
- Challenge the team when necessary and maintain a critical perspective on the group's decisions.
- Role-model the team member prototype by observing and adhering to the group's norms.
- Maintain an empathic relationship, with rich communication among teammates.

Watch: Why Good Leaders Make You Feel Safe

As you watch the following video, consider the leadership skills and traits that you possess that make clients feel safe.



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=2835#oembed-1

Video Transcript (see Appendix B 8.1)

Key Takeaways

- Leaders fulfill a group role associated with status and power within the group that may be formally or informally recognized by people inside and outside the group. While there are usually only one or two official leaders within a group, all group members can perform leadership functions, which are a complex of beliefs, communication patterns, and behaviours that influence

the functioning of a group and move a group toward the completion of its tasks.

- There are many perspectives on how and why people become leaders:
    - Designated leaders are officially recognized in their leadership roles and may be appointed or elected.
    - Emergent leaders gain status and respect through engagement with the group and its task and are turned to by others as a resource when leadership is needed.
    - The trait approach to studying leadership distinguishes leaders from followers based on traits or personal characteristics, such as physical appearance, communication ability, intelligence, and personality. While this approach helps understand how people conceptualize ideal leaders, it does not offer communication scholars much insight into how leadership can be studied and developed as a skill.
    - Situational context also affects how leaders emerge. Different leadership styles and skills are needed based on the level of the structure surrounding a group and how group interactions play out in initial meetings, and whether or not a leadership struggle occurs.
    - Leaders also emerge based on communication skills and competence, as certain communication behaviours create leadership conditions. This approach benefits communication scholars because leadership is seen as a set of learned and adaptable communication behaviours rather than traits or situational factors, often beyond our control.
- Leaders can adopt a directive, participative, supportive, or achievement-oriented style.
    - Directive leaders help provide psychological structure for their group members by clearly communicating expectations, keeping a schedule and agenda, providing specific guidance as group members work toward completing their tasks and taking the lead on setting and communicating group rules and procedures.
    - Participative leaders work to include group members in the decision-making process by soliciting and considering their opinions and suggestions.
    - Supportive leaders show concern for their followers' needs and emotions.
    - Achievement-oriented leaders strive for excellence and set challenging goals, constantly seeking improvement and exhibiting confidence that group members can meet their high expectations.
- Leaders and other group members move their groups toward success and completing their tasks by tapping into various types of power.
    - Legitimate power flows from a group member's officially recognized power, status, or title.
    - Expert power comes from a group member's knowledge, skill, or expertise, while others do not.
    - Referent power comes from the group member's attractiveness, likeability, and charisma.
    - Information power comes from a person's ability to access information through informal and well-established social and professional networks.
    - Reward power comes from the ability of a group member to provide a positive incentive as a compliance-gaining strategy, and coercive power comes from the ability of a group member to provide a negative incentive (punishment).

Exercises

1. In what situations would a designated leader be better than an emergent leader, and vice versa? Why?
2. Think of a leader you currently work with or have worked with who made a strong (positive or negative) impression on you. Which leadership style did they use most frequently? Cite specific communication behaviours to back up your analysis.

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8.2 Follower Group Roles

Learning Objectives

- Describe task-related follower group roles and behaviours.
- Describe maintenance follower group roles and behaviours.
- Describe negative follower group roles and behaviours.

Just as leaders have been long studied as a part of group communication research, so too have group member roles. Group roles are more dynamic than leadership roles in that a role can be formal or informal and played by more than one group member. Additionally, one group member may exhibit various role behaviours within a single group meeting or play a few consistent roles throughout their involvement with a group. Some people's role behaviours result from their personality traits. In contrast, others act out a specific role because of a short-term mood, as a reaction to another group member, or out of necessity. Group communication scholars have cautioned us not to always think of these roles as neatly bounded all-inclusive categories. After all, we all play multiple roles within a group and must draw on various communication behaviours to play them successfully. When someone continually exhibits a particular behaviour, it may be labelled as a role, but even isolated behaviours can impact group functioning. This section will discuss task-related, maintenance and individual roles that are self-centred or unproductive for the group (Benne & Sheats, 1948).

Task-Related Follower Roles and Behaviours

Task-related roles and their related behaviours contribute directly to the group's completion of a task or achievement of its goal or purpose. Task-related roles typically serve leadership, informational, or procedural functions. An individual may

be a task leader, expediter, information provider, information seeker, gatekeeper, or recorder.

Task Leader

Within any group, a task leader may have a high group status because of their maturity, problem-solving abilities, knowledge, or leadership experience and skills and who functions primarily to help the group complete its task (Cragan & Wright, 1991). This person may be a designated or emergent leader, but in either case, task leaders talk more during group interactions than other group members and do more work in the group. Depending on the group's number of tasks, there may be more than one task leader, especially if the tasks require different skills or knowledge. Because of the added responsibilities of being a task leader, individuals in these roles may experience higher stress levels. However, a task leader's stresses may be lessened through some of the maintenance role behaviours discussed later in this chapter.

Task-leader behaviours can be further divided into substantive and procedural (Pavitt, 1999). The substantive leader is the "idea person" who communicates "big picture" thoughts and suggestions that feed group discussion. The procedural leader is the person who gives the most guidance, perhaps following up on the ideas generated by the substantive leader. A skilled and experienced task leader may be able to perform both of these roles. Still, when two different people fill the roles, the person considered the procedural leader is more likely than the substantive leader to be viewed by members as the overall group leader. This indicates that task-focused groups assign more status to the person who guides the group toward the completion of the task (a "doer") than the person who comes up with ideas (the "thinker").

Expediter

The expediter is a task-related role that keeps the group on track toward completing its task by managing the agenda and setting and assessing goals to monitor its progress. An expediter does not push group members mindlessly

toward completing their task; an expediter must have a good sense of when a topic has been sufficiently discussed or when a group's extended focus on one area has led to diminishing returns. In such cases, the expediter may say, "Now that we have had a thorough discussion of the pros and cons of switching the staff from working in-person to virtual or hybrid, which side do you think has more support?" or "We have spent half of this meeting looking for examples of what other programs have done and have not found anything useful. Maybe we should switch gears to get something concrete done tonight."

To avoid the perception that group members are being rushed, a skilled expediter can demonstrate active-listening skills by paraphrasing what has been discussed and summarizing what has been accomplished to make it easier for group members to see the need to move on.

Information Provider

The role of information provider includes behaviours that are more evenly shared than in other roles. Ideally, all group members present new ideas, initiate discussions of new topics, and contribute their relevant knowledge and experiences. When group members are brought together because they each have different types of information, early group meetings may consist of group members taking turns briefing each other on their areas of expertise. In other situations, only one person in the group may be chosen because of their specialized knowledge. This person may be expected to be the primary information provider for all other group members.

Information Seeker

The information seeker asks for more information, elaboration, or clarification on items relevant to the group's task. The information sought may include factual information or group member opinions. In general, information seekers ask questions for clarification but can also ask questions that help provide an essential evaluative function. Most groups could benefit from more critically oriented information-seeking behaviours. Critical questioning helps increase the quality of

ideas and group outcomes and helps avoid groupthink. By asking for more information, people have to defend (in a nonadversarial way) or support their claims, which can help ensure that the information being discussed is credible, relevant, and thoroughly considered. When information seeking or questioning occurs due to poor listening skills, it risks negatively impacting the group. Skilled information providers and seekers are also good active listeners. They increase all group members' knowledge when paraphrasing and asking clarifying questions about the information presented.

Gatekeeper

The gatekeeper manages the flow of conversation in a group to achieve an appropriate balance so that all group members participate meaningfully. The gatekeeper may prompt others to provide information by saying, "Let's each share one idea for a movie to show during Black History Month." They may also help correct an imbalance between members who have provided much information already and members who have been quiet by saying something like, "Aretha, we have heard a lot from you today. Let's hear from someone else. Beau, what are your thoughts on Aretha's suggestion?" Gatekeepers should be cautious about "calling people out" or at least making them feel that way. Instead of scolding someone for not participating, they should be invitational and ask a member to contribute to something specific instead of just asking if they have anything to add. Since gatekeepers make group members feel included, they also service the relational aspects of the group (Engleberg et al., 2015).

Recorder

The recorder takes notes on the discussion and activities that occur during a group meeting. The recorder is the only role limited to one person at a time since, in most cases, it would not be necessary or beneficial to have more than one person recording. At less formal meetings, there may be no recorder, while at formal meetings, there is almost always a person who records meeting minutes, which are an overview of what occurred at the meeting. Each committee will have different rules or norms regarding the level of detail within and the availability of the

minutes. While some groups' minutes are required by law to be public, others may be strictly confidential. Even though a record of a group meeting may be valuable, the role of the recorder is often regarded as a low-status position since the person in the role may feel or be viewed as subservient to the other members who can more actively contribute to the group's functioning. Because of this, it may be desirable to have the role of the recorder rotate among members (Cragan & Wright, 1991).

Maintenance Follower Roles and Behaviours

Maintenance roles and their corresponding behaviours function to create and maintain social cohesion and fulfill the interpersonal needs of group members. These role behaviours require strong and sensitive interpersonal skills. The maintenance roles include social-emotional leader, supporter, tension releaser, harmonizer, and interpreter.

Social-Emotional Leader

The social-emotional leader within a group may perform a variety of maintenance roles and is generally someone well-liked by the other group members and whose role behaviours complement but do not compete with the task leader. The social-emotional leader may also reassure and support the task leader if they become stressed. Generally, the social-emotional leader is a reflective thinker with good perception skills. They use them to analyze the group dynamics and climate and initiate appropriate role behaviours to maintain a positive climate. Unlike task leader, this is not a role that typically shifts from one person to another. While all group members perform some maintenance role behaviours at various times, the social-emotional leader reliably functions to support group members and maintain a positive relational climate. Social-emotional leadership functions can become detrimental to the group and lead to less satisfaction among members when the maintenance behaviours performed are considered redundant or too distracting from the task (Pavitt, 1999).

Supporter

The role of supporter is characterized by communication behaviours that encourage other group members and provide emotional support as needed. The supporter's work primarily occurs in one-on-one exchanges that are more intimate and in-depth than the exchanges that take place during full group meetings. While many group members may make supporting comments publicly at group meetings, these comments are typically superficial or brief. A supporter uses active, empathetic listening skills to connect with group members who may seem down or frustrated by saying, "Tayesha, you seemed kind of down today. Is there anything you would like to talk about?" Supporters also follow up on previous conversations with group members to maintain the connections they've already established by saying things like, "Thomas, I remember you said your mom is having surgery this weekend. I hope it goes well. Let me know if you need anything." The supporter's communication behaviours are probably the least noticeable of any other maintenance roles, which may make this group member's efforts seem overlooked. Leaders and other group members can help support the supporter by acknowledging their contributions (Engleberg et al., 2015).

Tension Releaser

The tension releaser is someone who is naturally funny and sensitive to the personalities of the group and the dynamics of any given situation and who uses these qualities to manage the frustration level of the group. Being funny is not enough to fulfill this role, as jokes or comments could be humourous to other group members but delivered at an inopportune time, ultimately creating rather than releasing tension. The healthy use of humour by the tension releaser performs the same maintenance function as the empathy employed by the harmonizer or the social-emotional leader. Still, it is less intimate and is typically directed toward the whole group instead of just one person. The tension releaser may start serving this function during the forming stage of group development when primary tensions are present due to the typical uncertainties present during initial interactions. The tension releaser may help "break the ice" or make others feel at ease during the group's more socially awkward first meetings.

Harmonizer

The harmonizer role is played by group members who help manage the various types of group conflict that emerge during group communication (Engleberg et al., 2015). They keep their eyes and ears open for signs of conflict among group members and ideally intervene before it escalates. For example, the harmonizer may sense that one group member's critique of another member's idea was not received positively. They may be able to rephrase the critique more constructively, which can help diminish the other group member's defensiveness. Harmonizers also deescalate conflict once it has already started — for example, by suggesting that the group take a break and then mediating between group members in a side conversation. These actions can help prevent conflict from spilling over into other group interactions. In cases where the whole group experiences conflict, the harmonizer may help lead the group in perception-checking discussions that help members see an issue from multiple perspectives. For harmonizers to be effective, they must be viewed as impartial and committed to the group as a whole rather than to one side of an issue or one person or faction within the larger group. A special kind of harmonizer that helps manage cultural differences within the group is the interpreter.

Interpreter

The interpreter helps manage the diversity within a group by mediating intercultural conflict, articulating common ground between different people, and generally creating a climate where difference is seen as an opportunity rather than something to be feared. Just as an interpreter at the United Nations acts as a bridge between two languages, the interpreter can bridge identity differences between group members. Interpreters can help perform the other maintenance roles discussed with a particular awareness of and sensitivity toward cultural differences. While a literal interpreter would serve a task-related function within a group, this type of interpreter may help support a person who feels left out because they have a different cultural identity than most group members. Interpreters often act as allies to other people even though the interpreter does not share a specific cultural identity. The interpreter may help manage conflict resulting from diversity, in this case, acting as an ambassador or mediator. Because of their cultural

sensitivity, interpreters may also take a proactive role to help address conflict before it emerges — for example, by taking a group member aside and explaining why their behaviour or comments may be perceived as offensive.

Negative Follower Roles and Behaviours

It is essential to acknowledge that you may perform some negative behaviours within groups but that those behaviours do not necessarily constitute a role. A person may temporarily monopolize a discussion to bring attention to their idea. If that behaviour gets the group members' attention and makes them realize they were misinformed or headed in a negative direction, the behaviour may have been warranted. Negative behaviours can be enacted with varying intensity and regularity, and their effects may range from mild annoyance to group failure. The effects grow increasingly hostile as they increase in intensity and frequency. While a single enactment of a negative role behaviour may still harm the group, regular enactment would constitute a role. Playing that role is guaranteed to impact the group negatively. This section will divide the discussion of negative roles into self-centred and unproductive roles.

Self-Centred/Individual Roles

The behaviours associated with these divert attention from the task to the group member exhibiting the behaviour. Although all these roles share in their quest to put their own needs and goals ahead of the group's, they also serve to divert attention, and they do it in different ways and for other reasons (Engleberg et al., 2015).

Central Negative

The central negative role argues against most of the ideas and proposals discussed in the group and often emerges due to a leadership challenge during group formation. The failed attempt to lead the group can lead to resentment toward the leader or the group's purpose, manifesting in negative behaviours that delay, divert,

or block the group's progress toward achieving its goal (Engleberg et al., 2015). This scenario is unfortunate because the central negative is typically a motivated and intelligent group member who can benefit the group if adequately handled by the group leader or other members. Group leaders should actively incorporate central negatives into group tasks and responsibilities to make them feel valued and to help diminish any residual anger, disappointment, or hurt feelings from leadership conflict (Bormann & Bormann, 1988). Otherwise, the central negative will continue to argue against the proposals and decisions of the group, even when they may agree. Sometimes, the central negative may unintentionally serve a beneficial function if their criticisms prevent groupthink.

Monopolizer (Dominator)

The monopolizer (dominator) is a group member who makes excessive verbal contributions, preventing equal participation by other group members. In short, monopolizers like to hear the sound of their voices and do not follow typical norms for conversational turn-taking. Some people are well-informed, charismatic, and competent communicators who can get away with impromptu lectures and long stories, but monopolizers need to possess the magnetic qualities of such people. A group member's excessive verbal contributions are more likely to be labelled as monopolizing or dominating when unrelated to the task or provide unnecessary or redundant elaboration. Some monopolizers do not intentionally speak for longer than they should. Instead, they think they are making a genuine contribution to the group. These members likely lack sensitivity to nonverbal cues, or else they would see that other group members are tired of listening or are annoyed. Other monopolizers like to talk and don't care what others think. Some may try to make up for a lack of knowledge or experience. This monopolizer is best described as a dilettante or an amateur who tries to pass themselves off as an expert.

The "stage hog" monopolizes discussion with excessive verbal contributions and engages in one-upping and narcissistic listening. One-upping is a spotlight-stealing strategy in which people try to verbally "outdo" others by saying something like, "You think that is bad? Listen to what happened to me!" They also listen to others to find something they can connect back to themselves, not to understand the message. The stage hog is like the diva that refuses to leave the stage to let the

next performer begin. Unlike monopolizers, who may unknowingly engage in their behaviours, stage hogs are usually aware of their actions.

Self-Confessor

The self-confessor is a group member who tries to use group meetings as therapy sessions for issues unrelated to the group's task. Self-confessors tend to make personal self-disclosures that are unnecessarily intimate (Beebe et al., 2010). While it is reasonable to expect that someone experiencing a personal problem may want to consult with the group, mainly if they have formed close relationships with other group members, a self-confessor consistently comes to meetings with drama or a personal problem. A supporter or gatekeeper may be able to manage some degree of self-confessor behaviour. Still, a chronic self-confessor is likely to build frustration among other group members, leading to interpersonal conflict and a lack of cohesion and productivity. Most groups develop a norm regarding how much personal information is discussed during group meetings. Some limit such disclosures to the time before or after the meeting, which may help deter the self-confessor.

Insecure Compliment Seeker

The insecure compliment seeker wants to know that the group values them and seeks recognition that is often not task-related. For example, they do not want to be told they did a good job compiling a report; they want to know that they are a good person or attractive or intelligent — even though they might not be any of those things. In short, they try to get validation from their relationships with group members, validation that they may be lacking in relationships outside the group. Or they may be someone who continually seeks the approval of others or tries to overcompensate for insecurity through excessive behaviours aimed at eliciting compliments.

Joker (Clown)

A joker (clown) is a person who consistently uses sarcasm, plays pranks or tells

jokes, which distracts from the overall functioning of the group (Engleberg et al., 2015). In short, the Joker is an incompetent tension releaser. Rather than being seen as the witty group member with good timing, the Joker is seen as the "class clown." Like the insecure compliment seeker, the joker usually seeks attention and approval because of underlying insecurity. A group leader may have to intervene and privately meet with a person engaging in joker behaviour to help prevent a toxic or unsafe climate from forming. This may be ineffective, though, if a joker's behaviours are targeted toward the group leader, which could indicate that the joker has a general problem with authority. In the worst-case scenario, a joker may have to be expelled from the group if their behaviour becomes violent, offensive, illegal, or unethical.

Unproductive Roles

Some negative roles in group communication do not primarily function to divert attention from the group's task to a specific group member. Instead, these prevent or make it more difficult for the group to progress.

Blocker

The blocker intentionally or unintentionally keeps things from getting done in the group. Intentionally, a person may suggest that the group look into a matter further or explore another option before making a final decision, even though the group has already thoroughly considered the matter. They may cite a procedural rule or suggest that input be sought from additional people to delay progress. Behaviours that lead to more information gathering can be good for the group, but when they are unnecessary, they block behaviours. Unintentionally, a group member may set blocking behaviours in motion by missing a meeting or not completing their work on time.

Social Loafer

A social loafer, also known as a withdrawer, mentally or physically removes themselves from group activities and only participates when forced to. When

groups exceed five members, the likelihood of a member exhibiting social loafing behaviours increases; for example, a member may attend meetings and seemingly pay attention but not contribute to discussions or volunteer to take on tasks, instead waiting on other members to volunteer first. Social loafers often make other group members dread group work. A member may also avoid eye contact with other group members, sit apart from the group, or orient their body away from the group to avoid participation. Social loafers generally do not exhibit active listening behaviours. At the extreme, a group member may stop attending group meetings altogether. Adopting a problem-solving model that requires equal participation, building social cohesion early, and choosing a meeting space and seating arrangement that encourages interactivity can help minimize withdrawing behaviours. Gatekeepers, supporters, and group leaders can also intervene after early signs of withdrawing to reengage the group member.

Aggressor

An aggressor exhibits negative behaviours such as putting others' ideas down, attacking others personally when they feel confronted or insecure, competing unnecessarily to "win" at the expense of others within the group, and being outspoken to the point of distraction (Engleberg et al., 2015). An aggressor's behaviours can quickly cross the line between being abrasive or dominant and unethical. For example, a person vigorously defending a relevant and valid position differs from someone who claims others' ideas are stupid but has nothing to contribute. As with most behaviours, the aggressors fall into a continuum based on intensity. On the more benign end of the continuum is assertive behaviour, toward the middle is aggressive behaviour, and on the unethical side is bullying. At their worst, an aggressor's behaviours can lead to shouting matches or even physical violence within a group. Establishing group rules and norms that create a safe climate for discussion and include mechanisms for temporarily or permanently removing a group member who violates that safe space may proactively prevent such behaviours.

Key Takeaways

- Task-related follower group roles and behaviours contribute directly to the group's completion of a task or achieving its goal. These roles typically serve leadership, informational, or procedural functions and include the following: task leader, expediter, information provider, information seeker, gatekeeper, and recorder.
- Maintenance of follower group roles and behaviours functions to create and maintain social cohesion and fulfill the interpersonal needs of the group members. A person needs strong and sensitive interpersonal skills to perform these role behaviours. These roles include social-emotional leader, supporter, tension releaser, harmonizer, and interpreter.
- Negative follower role behaviours delay or distract the group. Self-centred role behaviours divert the group's attention to the group member exhibiting the behaviour. These roles include central negative, monopolizer, self-confessor, insecure compliment seeker, and joker. Unproductive role behaviours prevent or make it difficult for the group to progress. These roles include blocker, social loafer, and aggressor.

Exercises

1. Which task-related follower roles do you think to have the most significant potential for going wrong and causing conflict within the group and why?
2. Which maintenance follower role have you performed best in previous group experiences? How did your communication and behaviours help you perform the role's functions? Which maintenance follower role have you had the most difficulty or least interest in performing? Why?
3. Describe a situation in which you have witnessed a person playing one of the self-centred roles in a group. How did the person communicate? What were the effects? Now describe a situation in which you have witnessed a person playing one of the unproductive roles in a group. How did the person communicate? What were the effects?

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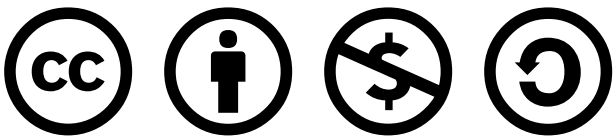
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8.3 Problem Solving and Decision-Making

Learning Objectives

- Explain the standard components and characteristics of problems.
- Explain the five steps of the problem-solving process.
- Describe the brainstorming technique that should take place before decisions are made.
- Compare and contrast various decision-making techniques.
- Describe what influences decision-making.

Although the steps of problem-solving and decision-making that are discussed may seem obvious, you may not think to or choose not to use them. Instead, you may start working on a problem and later realize you need help and must backtrack. You may have reached a point in a project or task and had the "okay, now what?" moment. It is frustrating to get to a crucial point in a project only to realize that you must start over completely. This section will discuss the group problem-solving process, methods of decision-making, and influences on these processes.

Problem Solving

The problem-solving process involves thoughts, discussions, actions, and decisions from the first consideration of a problematic situation to the goal. Leaders face various problems, but some common problems include budgeting funds, raising funds, planning events, addressing customer or citizen complaints, creating or adapting products or services to fit needs, supporting members, and raising awareness about issues or causes.

Problems of all sorts have three standard components (Adams & Galanes, 2009):

An undesirable situation. When conditions are desirable, there is not a problem.

A desired situation. Even though it may only be a vague idea, there is a drive to better the undesirable situation. The vague idea may develop into a more precise goal that can be achieved, although solutions are not yet generated.

Obstacles between undesirable and desirable situations. These things stand in the way between the current situation and the group's goal of addressing it. This problem component requires the most work and is where decision-making occurs. Some examples of obstacles include limited funding, resources, personnel, time, or information. Obstacles can also take the form of people working against the group, including people resistant to change or those who disagree.

Discussion of these three elements of a problem helps the group tailor its problem-solving process, as each situation will vary. While these three general elements are present in each problem, the group should also address specific characteristics of the problem. Five expected and essential characteristics to consider are task difficulty, number of possible solutions, group member interest in the problem, familiarity with the problem, and the need for solution acceptance (Adams & Galanes, 2009).

Task difficulty. Difficult tasks are also typically more complex. Groups should be prepared to spend time researching and discussing a challenging and complex task to develop shared foundational knowledge. This typically requires individual work outside the group and frequent group meetings to share information.

Several possible solutions. There are usually multiple ways to solve a problem or complete a task, but some problems have more potential solutions than others. Figuring out how to prepare a beach house for an approaching hurricane is relatively complex and challenging, but there are still a limited number of things to do — for example, taping and boarding up windows; turning off water, electricity, and gas; trimming trees; and securing loose outside objects. Other problems may be more creatively based. For example, designing a new restaurant may entail using standard solutions and many different types of innovation with layout and design.

Individuals are interested in the problem. When individuals are interested in the

problem, they will be more engaged with the problem-solving process and invested in finding a quality solution. Individuals interested in and knowledgeable about the problem may want more freedom to develop and implement solutions. In contrast, low-interest individuals may prefer a leader who provides structure and direction.

Individual familiarity with the problem. Some groups encounter a problem regularly, while others are more unique or unexpected. Many groups that rely on funding have to revisit a budget every year, and in recent years, groups have had to get more creative with budgets as funding has been cut in nearly every sector. When group members are unfamiliar with a problem, they will need background research on what similar groups have done and may need to bring in outside experts.

Need for solution acceptance. In this step, groups must consider how many people the decision will affect and how much "buy-in" from others is needed for their solution to be successfully implemented. Some small groups have many stakeholders on whom the success of a solution depends. Other groups are answerable only to themselves. When a small group plans to build a new park in a crowded neighbourhood or implement a new health care policy, it can be very difficult to develop solutions that all will accept. In such cases, groups will want to poll those affected by the solution and may want to do a pilot implementation to see how people react. Imposing an excellent solution without stakeholders' buy-in can still lead to failure.

Group Problem-Solving Process

Several problem-solving models exist in Dewey's well-known reflective thinking process (Bormann & Bormann, 1988). As you read through the steps in the process, think about how you can apply what you learned regarding the general and specific elements of problems. Some of the following steps are straightforward and are things you would logically do when faced with a problem. However, taking a deliberate and systematic approach to problem-solve has been shown to benefit group functioning and performance. A deliberate approach is especially beneficial for groups with no established history of working together and who can only meet occasionally. Although a group should attend to each step of the process, group

leaders or other group members who facilitate problem-solving should be cautious not to dogmatically follow each element of the process or force a group along it. Such a lack of flexibility could limit group member input and negatively affect cohesion and climate.

Step 1. Define the Problem

Define the problem by considering the three elements shared by every problem: the current undesirable situation, the goal or more desirable situation, and obstacles (Adams & Galanes, 2009). At this stage, group members share what they know about the current situation without proposing solutions or evaluating the information. Here are some good questions to ask during this stage: What is the current difficulty? How did you come to know that the difficulty exists? Who or what is involved? Why is it meaningful/urgent/essential? What have the effects been so far? What, if any, elements of the difficulty require clarification? At the end of this stage, the group should be able to compose a single sentence that summarizes the problem called a **problem statement**. Avoid wording in the problem statement or question that hints at potential solutions, such as "Our province currently does not have a mechanism for the public to report suspected ethical violations by health professionals."

Step 2. Analyze the Problem

During this step, a group should analyze the problem and the group's relationship to the problem. Whereas the first step involved exploring the "what" related to the problem, this step focuses on the "why." At this stage, group members can discuss the potential causes of the difficulty. Group members may also want to begin setting an agenda or timeline for the group's problem-solving process, looking forward to the other steps. The group can comprehensively analyze the problem by discussing the five standard problem variables discussed before. Here are two examples of questions that the group formed to address ethics violations might ask: Why does our profession not have an ethics reporting mechanism? Do other professions of similar size have such a mechanism? Once the problem has been analyzed, the group can pose a **problem question** that will guide the group as

it generates possible solutions. “How can the public report suspected ethical violations of health professionals, and how will such reports be processed and addressed?” As you can see, the problem question is more complex than the problem statement since the group has moved on to a more in-depth discussion of the problem during Step 2.

Step 3. Generate Possible Solutions

During this step, group members generate possible solutions to the problem. Again, solutions should not be evaluated at this point, only proposed and clarified. The question should be what the group could do to address this problem, not what the group should do. It is perfectly okay for a group member to question another person’s idea by asking, “What do you mean?” or “Could you explain your reasoning more?” Discussions at this stage may reveal a need to return to previous steps to define better or more fully analyze a problem. Since many problems are multifaceted, group members must generate solutions for each part of the problem separately, ensuring multiple solutions for each part. Stopping the solution-generating process prematurely can lead to groupthink. For the problem question previously posed, the group would need to generate solutions for all three parts of the problem included in the question. Possible solutions for the first part of the problem (How can the public report ethical violations?) may include an “online reporting system, email, in-person, anonymously, on-the-record,” and so on. Possible solutions for the second part of the problem (How will reports be processed?) may include “daily by a newly appointed ethics officer, weekly by a nonpartisan nongovernment employee,” and so on. Possible solutions for the third part of the problem (How will reports be addressed?) may include “by a newly appointed ethics commission, by the accused’s supervisor, by professionals reporting body,” and so on.

Step 4. Evaluate Solutions

Solutions can be critically evaluated during this step based on their credibility, completeness, and worth. Once the potential solutions have been narrowed based on more apparent differences in relevance and merit, the group should analyze

each solution based on its potential effects — predominantly adverse effects. Groups that must report the rationale for their decision or whose decisions may be subject to public scrutiny would be wise to make a list of criteria for evaluating each solution. Additionally, solutions can be evaluated based on their fit with the group's charge and abilities. To do this, group members may ask, "Does this solution live up to the original purpose or mission of the group?" "Can the solution be implemented with our current resources and connections?" and "How will this solution be supported, funded, enforced, and assessed?" Secondary tensions and substantive conflict, two concepts discussed earlier, emerge during this problem-solving step, and group members must employ practical critical thinking and listening skills.

Decision-making is part of the more extensive problem-solving process and plays a prominent role in this step. While there are several pretty similar models for problem-solving, there are many varied decision-making techniques that groups can use. For example, to narrow the proposed solutions, group members may decide by majority vote, weighing the pros and cons, or discussing them until a consensus is reached. There are also more complex decision-making models, such as the "six hats" method. Once the final decision is reached, the group leader or facilitator should confirm that the group agrees. It may be beneficial to let the group break for a while or delay the final decision until a later meeting to allow people time to evaluate it outside of the group context.

Step 5. Implement and Assess the Solution

Implementing the solution requires some advanced planning and should not be rushed unless the group operates under strict time restraints or delay may lead to some harm. Although some solutions can be implemented immediately, others may take days, months, or years. As was noted earlier, it may be beneficial for groups to poll those affected by the solution and their opinion of it or do a pilot test to observe the solution's effectiveness and how people react to it. Before implementation, groups should also determine how and when they would assess the solution's effectiveness by asking, "How will the group know if the solution is working?" Since solution assessment will vary based on whether or not the group is disbanded, groups should also consider the following questions: If the group

disbands after implementation, who will be responsible for assessing the solution? If the solution fails, will the same group reconvene, or will a new group be formed?

Some aspects of the solution may need to be delegated to various people inside and outside the group. Group members may also be assigned to implement a particular part of the solution based on their role in the decision-making or because it connects to their expertise. Likewise, group members may be tasked with publicizing the solution or "selling" it to a particular group of stakeholders. Last, the group should consider its future. Sometimes, the group will decide if it will stay together and continue working on other tasks or disband. In other cases, outside forces determine the group's fate.

Problem-Solving and Group Presentations

Giving a group presentation requires that individual group members and the group solve many problems and make many decisions. Although having more people involved in a presentation increases logistical difficulties and has the potential to create more conflict, a well-prepared and well-delivered group presentation can be more engaging and effective than a typical presentation. The main problems facing a group giving a presentation are (1) dividing responsibilities, (2) coordinating schedules and time management, and (3) working out the logistics of the presentation delivery.

Regarding dividing responsibilities, assigning individual work at the first meeting and then trying to fit it all together before the presentation (which is what many college students do when faced with a group project) is not recommended. Integrating content and visual aids created by several different people into a seamless final product takes time and effort, and the person "stuck" with this job usually develops resentment toward his or her group members. While it is okay for group members to work independently outside of group meetings, spend time working together to help set up some standards for content and formatting expectations that will help make later integration of work more manageable. Taking the time to complete one part of the presentation together can help set those standards for later individual work. Discuss the roles that various group members will play openly to avoid confusion. There could be one point person for keeping

track of the group's progress and schedule, one for communication, one for content integration, one for visual aids, and so on. Each person should not do all that work on his or her own but help focus the group's attention on his or her specific area during group meetings (Stanton, 2009).

Scheduling group meetings is one of the most challenging problems groups face, given people's busy lives. From the beginning, it should be communicated that the group needs to spend considerable time in face-to-face meetings. Group members should know they may have to sacrifice to attend occasionally. Especially important is the commitment to scheduling time to rehearse the presentation. Consider creating a contract of group guidelines that include expectations for meeting attendance to increase group members' commitment.

Group presentations require members to navigate many logistics of their presentation. While it may be easier for a group to assign each member to create a five-minute segment and then transition from one person to the next, this is not the most engaging method. Creating a master presentation and assigning individual speakers creates a more fluid and dynamic presentation and allows everyone to become familiar with the content, which can help if a person does not show up to present during the question-and-answer section. Once the presentation's content is complete, figure out introductions, transitions, visual aids, and the use of time and space (Stanton, 2012). In terms of introductions, figure out if one person will introduce all the speakers at the beginning if speakers will introduce themselves at the beginning, or if introductions will occur as the presentation progresses. In terms of transitions, make sure each person has included in his or her speaking notes when presentation duties switch from one person to the next. Visual aids can potentially cause hiccups in a group presentation if they are not fluidly integrated. Practicing visual aids and having one person control them may help prevent this. Know how long your presentation is and how you will use the space. Presenters should know how long the whole presentation should be and how long each segment should be so that everyone can share the responsibility of keeping time. Also, consider the size and layout of the presentation space. You do not want presenters huddled in a corner until it is their turn to speak or trapped behind furniture when their turn comes around.

Decision-Making in Groups

You engage in personal decision-making daily and know that some decisions are more complex than others. When decisions are made in groups, you may face some challenges, but you also stand to benefit from some advantages of group decision-making (Napier & Gershenfeld, 2004). Group decision-making can appear fair and democratic but might only be a gesture that covers up the fact that certain group members or the group leader have already decided. Group decision-making also takes more time than individual decisions. It can be burdensome if some group members do not do their assigned work, divert the group with self-centred or unproductive role behaviours, or miss meetings. Conversely, group decisions are often more informed since all members develop a shared understanding of a problem through discussion and debate. The shared understanding may also be more complex and profound than what an individual would develop because the group members are exposed to various viewpoints that can broaden their perspectives. Most groups do not use a specific decision-making method, perhaps thinking they will work things out as they go. This can lead to unequal participation, social loafing, premature decisions, prolonged discussion, and other negative consequences.

Brainstorming Before Decision-Making

Before groups can decide, they need to generate possible solutions to their problem. The most commonly used method is brainstorming, although most people do not follow the recommended steps of brainstorming. As you will recall, brainstorming refers to the quick generation of ideas free of evaluation. The originator of the term brainstorming said the following four rules must be followed for the technique to be effective (Osborn, 1959):

1. Evaluation of ideas is discouraged.
2. Wild and crazy ideas are encouraged.
3. Quantity of ideas is the goal.
4. New combinations of ideas presented are encouraged.

Group communication scholars have suggested additional steps that precede and

follow brainstorming to make brainstorming more of a decision-making method than an idea-generating one (Cragan & Wright, 1991).

Do a warm-up brainstorming session. Some people are more apprehensive about publicly communicating their ideas than others, and a warm-up session can help ease apprehension and prime group members for task-related idea generation. Anyone in the group can initiate the warm-up, and should only go on for a few minutes. To get things started, a person could ask, "If our group formed a band, what would it be called?" or "What other purposes could a university degree serve?" In the previous examples, the first warm-up flows the group's more abstract creative juices, while the second focuses more on practical and concrete ideas.

Do the actual brainstorming session. This session should not last more than 30 minutes and follow the four brainstorming rules mentioned previously. The facilitator could encourage people to piggyback off each other's ideas to ensure the fourth rule is realized.

Eliminate duplicate ideas. After the brainstorming session, group members can eliminate (without evaluating) similar or very similar ideas.

Clarify, organize, and evaluate ideas. Before evaluation, see if any ideas need clarification. Then try to theme or group ideas together in some orderly fashion. Since "wild and crazy" ideas are encouraged, some suggestions may need clarification. If it becomes clear that there is not a foundation to an idea and that it is too vague or abstract and cannot be clarified, it may be eliminated. As a caution, it may be wise not to throw out off-the-wall ideas that are hard to categorize and instead put them in a miscellaneous or "wild and crazy" category.

Discussion Before Decision-Making

This nominal group technique guides decision-making through a four-step process that includes idea generation and evaluation and seeks to elicit equal contributions from all group members (Delbecq & Van de Ven, 1971). This method is helpful because the procedure involves all group members systematically, which fixes the problem of uneven participation during discussions. Since everyone contributes to

the discussion, this method can also help reduce instances of social loafing. To use the nominal group technique, do the following:

1. Silently and individually list ideas.
2. Create a master list of ideas.
3. Clarify ideas as needed.
4. Take a secret vote to rank group members' acceptance of ideas.

During the first step, have group members work quietly in the same space to write down every idea to address their task or problem. This should not take more than 20 minutes. Whoever is facilitating the discussion should remind group members to use brainstorming techniques, which means they should not evaluate ideas as they are generated. Ask group members to remain silent once they have finished their list so they do not distract others.

During the second step, the facilitator goes around the group consistently, asking each person to share one idea at a time. As the idea is shared, the facilitator records it on a master list that everyone can see. Keep track of how many times each idea comes up, as that could be an idea that warrants more discussion. Continue this process until all the ideas have been shared. As a note to facilitators, some group members may begin to edit their list or self-censor when asked to provide one of their ideas. To limit a person's apprehension about sharing his or her ideas and to ensure that each idea is shared, I have asked group members to exchange lists with someone else so they can share ideas from the list they receive without fear of being judged.

During step three, the facilitator should note that group members can now ask for clarification on ideas on the master list. Do not let this discussion stray into the evaluation of ideas. To help avoid an unnecessarily long discussion, it may be helpful to go from one person to the next to ask which ideas need clarifying and then go to the originator(s) of the idea in question.

During the fourth step, members use a voting ballot to rank the acceptability of the ideas on the master list. If the list is long, you may ask group members to rank only their top five or so choices. The facilitator then takes up the secret ballots and reviews them in a random order, noting the rankings of each idea. Ideally, the highest-ranked idea can then be discussed and decided on. The nominal group

technique does not carry a group through to the point of decision; instead, it sets the group up for a roundtable discussion or uses another method to evaluate the merits of the top ideas.

Specific Decision-Making Techniques

Some decision-making techniques involve determining a course of action based on the level of agreement among the group members. These methods include majority, expert, authority, and consensus rule.

Majority rule is a commonly used decision-making technique in which a majority (one-half plus one) must agree before deciding. A show-of-hands vote, a paper ballot, or an electronic voting system can determine the majority choice. Many decision-making bodies use majority rule to make decisions, which is often associated with democratic decision-making since each person gets one vote, and each vote counts equally. Of course, other individuals and mediated messages can influence a person's vote. Still, since the voting power is spread out over all group members, it is not easy for one person or party to take control of the decision-making process. The pros and cons of majority rule are:

Pros

- quick
- efficient in large groups
- each vote counts equally

Cons

- close decisions (e.g., 5–4) may reduce internal and external "buy-in"
- does not take advantage of group synergy to develop alternatives that more members can support
- the minority may feel alienated

Minority rule is a decision-making technique in which a designated authority or expert has the final say over a decision and may or may not consider the input of

other group members. When a designated expert decides by minority rule, there may be buy-in from others, especially if the group members do not have relevant knowledge or expertise. When a designated authority makes decisions, buy-in will vary based on group members' respect for the authority. For example, decisions made by an elected authority may be more accepted by those who elected them than those who did not. As with the majority rule, this technique can be time-saving. Unlike majority rule, one person or party can control the decision-making process. This type of decision-making is more similar to that used by monarchs and dictators. An obvious negative consequence of this method is that the needs or wants of one person can override the needs and wants of the majority. The pros and cons of minority rule by experts are:

Pros

- quick
- decision quality is better than what less knowledgeable people could produce
- experts are typically objective and less easy to influence

Cons

- expertise must be verified
- experts can be challenging to find pay for
- group members may feel useless

The pros of minority rule by authority are:

- quick
- buy-in could be high if authority is respected

Cons

- authority may not be seen as legitimate, leading to less buy-in
- group members may try to sway the authority or compete for their attention
- unethical authorities could make decisions that benefit them and harm group members

The consensus rule is a decision-making technique in which all group members

must agree on the same decision. Usually, a decision may be ideal for all group members, leading to a unanimous agreement without further debate and discussion. Although this can be positive, be cautious that this is not a sign of groupthink. More typically, the consensus is reached only after a lengthy discussion. On the plus side, consensus often leads to high-quality decisions due to the time and effort it takes to get everyone in agreement. Group members are also more likely to be committed to the decision because they invest in reaching it. On the negative side, the ultimate decision is often one that all group members can live with but is not ideal for all members. Reaching a consensus also includes conflict, as people debate ideas and negotiate the interpersonal tensions that may result. The pros and cons of the consensus rule are:

Pros

- high-quality decisions due to the time invested
- higher level of commitment because of participation in decision
- satisfaction with the decision because of shared agreement

Cons

- time-consuming
- challenging to manage ideas and personal conflict that can emerge as ideas are debated
- the decision may be okay but not ideal

Influences on Decision-Making

Many factors influence the decision-making process. For example, how might a group's independence or access to resources affect their decisions? What potential advantages and disadvantages come with decisions made by groups that are more or less similar in terms of personality and cultural identities? This section will explore how situational, personality and cultural influences affect group decision-making.

Situational Influences on Decision-Making

A group's situational context affects decision-making. One key situational element is the degree of freedom the group has to make its own decisions, secure its resources, and initiate its actions. Some groups undergo multiple approval processes before doing anything, while others are self-directed, self-governing, and self-sustaining. Another situational influence is uncertainty. In general, groups deal with more uncertainty in decision-making than individuals because of the increased number of variables that comes with adding more people to a situation. Individual group members cannot know what other group members are thinking, whether or not they are doing their work, and how committed they are to the group. So the size of a group is a powerful situational influence, as it adds to uncertainty and complicates communication.

Access to information also influences a group. First, the nature of the group's task or problem affects its ability to get information. Group members can more easily decide about a problem when other groups have similarly experienced it. Even if the problem is complex and severe, the group can learn from other situations and apply what it learns. Second, the group must have access to flows of information. Access to archives, electronic databases, and individuals with relevant experience is necessary to obtain relevant information about similar problems or to research a new or unique problem. In this regard, group members' formal and information network connections also become important situational influences.

The origin and urgency of a problem are also situational factors that influence decision-making. In terms of origin, problems usually occur in one of four ways:

Something goes wrong. Group members must decide how to fix or stop something. For example, health professionals find out that half of the building is contaminated with mold and must be closed down.

Expectations change or increase. Group members must innovate more efficient or effective ways of doing something. For example, health professionals find out that the city boundaries they are responsible for are being expanded.

Something goes wrong, and expectations change or increase. Group members must fix/stop and become more efficient/effective. For example, health

professionals must close half the building and start seeing more clients due to the expanding boundaries.

The problem existed from the beginning. Group members must go back to the origins of the situation and walk through and analyze the steps again to decide what can be done differently. For example, health professionals have consistently had to work with minimal building space and supply resources.

In each case, the need for a decision may be more or less urgent depending on how badly something is going wrong, how high the expectations have been raised, or the degree to which people are fed up with a broken system. Decisions must be made in situations ranging from crisis level to mundane.

Personality Influences on Decision-Making

A long-studied typology of value orientations that affect decision-making consists of the following types of decision-makers: the economic, the aesthetic, the theoretical, the social, the political, and the religious (Spranger, 1928).

- The *economic* decision-maker makes decisions based on what is practical and valuable.
- The *aesthetic* decision-maker makes decisions based on form and harmony, desiring a solution that is elegant and in sync with the surroundings.
- The *theoretical* decision-maker wants to discover the truth through rationality.
- The *social* decision-maker emphasizes the personal impact of a decision and sympathizes with those who may be affected by it.
- The *political* decision-maker is interested in power and influence and views people and property as divided into groups with different values.
- The *religious* decision-maker seeks to identify with a larger purpose, works to unify others under that goal, and commits to a viewpoint, often denying one side and being dedicated to the other.

The personalities of group members, especially leaders and other active members, affect the group's climate. Group member personalities can be categorized based on where they fall on a continuum anchored by the following descriptors: dominant/submissive, friendly/unfriendly, and instrumental/emotional (Cragan &

Wright, 1999). The more group members there are in any extreme of these categories, the more likely the group climate will also shift to resemble those characteristics.

- **Dominant versus submissive**. More dominant group members act more independently and directly, initiate conversations, take up more space, make more direct eye contact, seek leadership positions, and take control over decision-making processes. More submissive members are reserved, contribute to the group only when asked to, avoid eye contact, and leave their personal needs and thoughts unvoiced or give in to the suggestions of others.
- **Friendly versus unfriendly**. Group members on the friendly side of the continuum find a balance between talking and listening, do not try to win at the expense of other group members, are flexible but not weak, and value democratic decision-making. Unfriendly group members are disagreeable, indifferent, withdrawn, and selfish, leading them to either not invest in decision-making or direct it in their interest rather than the group's interests.
- **Instrumental versus emotional**. Instrumental group members are emotionally neutral, objective, analytical, task-oriented, and committed followers, which leads them to work hard and contribute to the group's decision-making as long as it is orderly and follows agreed-on rules. Emotional group members are creative, playful, independent, unpredictable, and expressive, which leads them to make rash decisions, resist group norms or decision-making structures, and often switch from relational to task focus.

Cultural Context and Decision-Making

Like neighbourhoods, schools, and countries, small groups vary in terms of their degree of similarity and difference. Demographic changes and technological increases that can bring different people together make it more likely that you will interact in more heterogeneous groups (Allen, 2011). Some small groups are more homogenous, meaning the members are more similar, and some are more heterogeneous, meaning the members are more different. Diversity and differences within groups have advantages and disadvantages. In terms of advantages, research finds that, in general, culturally heterogeneous groups have better overall performance than more homogenous groups (Haslett & Ruebush, 1999).

Additionally, when group members have time to get to know each other and competently communicate their differences, diversity's advantages include better decision-making due to different perspectives (Thomas, 1999). Unfortunately, groups often operate under time constraints and other pressures that make the possibility for intercultural dialogue and understanding difficult. The main disadvantage of heterogeneous groups is the possibility of conflict, but given that all groups experience conflict, this is not solely due to the presence of diversity.

International Diversity in Group Interactions

Cultural value orientations such as individualism/collectivism, power distance, and high-/low-context communication styles manifest on a continuum of communication behaviours and can influence group decision-making. Group members from individualistic cultures are likelier to value task-oriented, efficient, and direct communication. This could manifest in dividing tasks into individual projects before collaboration begins and then openly debating ideas during discussion and decision-making. Additionally, people from cultures that value individualism are more likely to openly dissent from a decision, expressing their disagreement with the group. Group members from collectivistic cultures are more likely to value relationships over the task. Because of this, they also tend to value conformity and face-saving (often indirect) communication. This could manifest in behaviours such as establishing norms that include periods of socializing to build relationships before task-oriented communication, such as negotiation begins, or norms that limit public disagreement in favour of more indirect communication that does not challenge the face of other group members or the group's leader. In a group of people from a collectivistic culture, each member would likely play harmonizing roles, looking for signs of conflict and resolving them before they become public.

Power distance can also affect group interactions. Some cultures rank higher on power-distance scales, meaning they value hierarchy, make decisions based on status, and believe that people have a set place in society that is relatively unchangeable. Group members from high-power-distance cultures would likely appreciate a strong designated leader who exhibits a more directive leadership style and prefer groups in which members have clear and assigned roles. Higher-

status members could provide information openly in a homogenous group with a high-power-distance orientation. Those with lower status may not provide information unless a higher-status member explicitly seeks it. Low-power-distance cultures do not place as much value and meaning on status and believe all group members can participate in decision-making. Group members from low-power-distance cultures would likely freely speak their minds during a group meeting and prefer a participative leadership style.

How much meaning is conveyed through the context surrounding verbal communication can also affect group communication. Some cultures have a high-context communication style in which much of the meaning in interaction is conveyed through contexts such as nonverbal cues and silence. Group members from high-context cultures may avoid saying something directly, assuming other group members will understand the intended meaning even if the message is indirect. So if someone disagrees with a proposed course of action, they may say, "Let us discuss this tomorrow," and mean, "I do not think the group should do this." Such indirect communication is also a face-saving strategy common in collectivistic cultures. Other cultures have a low-context communication style emphasizing the meaning conveyed through words rather than context or nonverbal cues. Group members from low-context cultures often say what they mean and mean what they say. For example, if someone does not like an idea, they might say, "I think the group should consider more options. This one does not seem like the best option."

In any of these cases, an individual from one culture operating in a group with people of a different cultural orientation could adapt to the expectations of the host culture, especially if that person possesses a high degree of intercultural communication competence (ICC). Additionally, people with high ICC can also adapt to a group member with a different cultural orientation than the host culture. Even though these cultural orientations connect to values that affect our communication in reasonably consistent ways, individuals may exhibit different communication behaviours depending on their communication style and the situation.

Domestic Diversity and Group Communication

While it is becoming more likely that you will interact in small groups with

international diversity, you are guaranteed to interact in diverse groups regarding the cultural identities within a single country or the subcultures within a larger cultural group.

Gender stereotypes sometimes influence the roles that people play within a group. For example, the stereotype that women are more nurturing than men may lead group members (both male and female) to expect that women will be supporters or harmonizers within the group. Since women have primarily performed secretarial work since the 1900s, they may also be expected to play the recorder role. In both cases, stereotypical notions of gender place women in roles that are typically less valued in group communication. The opposite is true for men. In terms of leadership, despite notable exceptions, men fill an overwhelmingly disproportionate amount of leadership positions. You may have been socialized to see certain behaviours by men as indicative of leadership abilities, even though they may not be. For example, men are often perceived to contribute more to a group because they tend to speak first when asked a question or to fill a silence and talk more about task-related matters than relationally oriented matters. Both of these tendencies create a perception that men are more engaged with the task. Men are also socialized to be more competitive and self-congratulatory, meaning that their communication may be seen as dedicated, and their behaviours are seen as powerful. When their work is not noticed, they will be likelier to make it known to the group rather than take silent credit. Even though relational elements of a group are crucial for success, even in high-performance teams, that work is not as valued in our society as task-related work.

Even though some communication patterns and behaviours related to our typical (and stereotypical) gender socialization affect how you interact in and form perceptions of others in groups, the differences in group communication that used to be attributed to gender in early group communication research seem to be diminishing. This is likely due to the changing organizational cultures from which much group work emerges, which now has more than 60 years to adjust to women in the workplace. It is also due to a more nuanced understanding of gender-based research, which does not take a stereotypical view from the beginning, as many early male researchers did. Now, instead of biological sex being assumed as a factor that creates inherent communication differences, group communication scholars see that men and women exhibit a range of more or less feminine or masculine behaviours. It is these gendered behaviours, and not a person's gender, that seem

to have more of an influence on perceptions of group communication. Interestingly, group interactions are still masculinist in that male and female group members prefer a more masculine communication style for task leaders. Both males and females in this role are more likely to adapt to a more masculine communication style. Conversely, men who take on social-emotional leadership behaviours adopt a more feminine communication style. In short, although masculine communication traits are more often associated with high-status group positions, men and women adapt to this expectation and are evaluated similarly (Haslett & Ruebush, 1999).

Other demographic categories are also influential in group communication and decision-making. In general, group members have an easier time communicating when they are more similar than different regarding race and age. This ease of communication can make group work more efficient, but the homogeneity may sacrifice some creativity. As learned earlier, diverse groups (e.g., they have members of different races and generations) benefit from the diversity of perspectives regarding the quality of decision-making and creativity of output.

In terms of age, for the first time since industrialization began, it is common to have three generations of people (and sometimes four) working side by side in an organizational setting. Although four generations often worked together in early factories, they were segregated based on their age group. A hierarchy existed with older workers at the top and younger workers at the bottom. Today, however, generations interact regularly, and it is not uncommon for an older person to have a younger leader or supervisor (Allen, 2011). The current generations in the workplace and, consequently, in work-based groups include the following:

- **The Silent Generation**. Born between 1925 and 1942, this is the most negligible generation in the workforce, as many have retired or left for other reasons. This generation includes people born during the Great Depression or the early part of World War II, many of whom later fought in the Korean War (Clarke, 1970).
- **The Baby Boomers**. Born between 1946 and 1964, this is the largest generation in the workforce. Baby boomers are the most populous generation born in Canadian history, working longer than previous generations, which means they will remain the predominant force in organizations for 10 to 20 more years.
- **Generation X**. Born between 1965 and 1981, this generation was the first to see technology such as cell phones and the Internet make its way into classrooms

and our daily lives. Compared to previous generations, "Gen-Xers" are more diverse in terms of race, religious beliefs, and sexual orientation and also have a greater appreciation for and understanding of diversity.

- **Generation Y**. Born between 1982 and 2000, "Millennials," as they are also called, are currently in their early 20s up to about 40 years old. This generation is less likely to remember a time without technology, such as computers and cell phones. Many millennials entered the workforce at the height of the Great Recession and were significantly affected by this economic crisis of the late 2000s, experiencing significantly high unemployment rates.
- **Generation Z**. Born between 1997-2012. This generation has been raised on technology, the internet, and social media. They are just entering the workforce.

The benefits and challenges of the diversity of group members are significant to consider. Since you will likely work in diverse groups, you should be prepared to address potential challenges to reap the benefits. Diverse groups may be wise to coordinate social interactions outside of group time to find common ground that can help facilitate interaction and increase group cohesion. You should be sensitive but not let sensitivity create fear of "doing something wrong," preventing you from meaningful interactions.

Key Takeaways

- Every problem has standard components: an undesirable situation, a desired situation, and obstacles between the undesirable and desirable situations. Every problem also has a set of characteristics that vary among problems, including task difficulty, number of possible solutions, group member interest in the problem, group familiarity with the problem, and the need for solution acceptance.
- The group problem-solving process has five steps:
    1. Define the problem by creating a problem statement that summarizes it.
    2. Analyze the problem and create a problem question that can guide solution generation.
    3. Generate possible solutions. Possible solutions should be offered and listed without stopping to evaluate each one.

4. Evaluate the solutions based on their credibility, completeness, and worth. Groups should also assess the potential effects of the narrowed list of solutions.
5. Implement and assess the solution. Aside from enacting the solution, groups should determine how they will know whether the solution is working.

- Before a group makes a decision, it should brainstorm possible solutions. Group communication scholars suggest that groups: (1) do a warm-up brainstorming session; (2) do an actual brainstorming session in which ideas are not evaluated, wild ideas are encouraged, quantity, not quality, of ideas, is the goal, and new combinations of ideas are encouraged; (3) eliminate duplicate ideas; and (4) clarify, organize, and evaluate ideas. The group may also use the nominal group technique to guide the idea-generation process and invite equal participation from group members.
- Standard decision-making techniques include majority rule, minority rule, and consensus rule. With majority rule, only a majority, usually one-half plus one, must agree before deciding. With minority rule, a designated authority or expert has the final say over a decision, and the input of group members may or may not be invited or considered. With the consensus rule, all group members must agree on the same decision.

- Several factors influence the decision-making process:

    - Situational factors include the degree of freedom a group has to make its own decisions, the level of uncertainty facing the group and its task, the size of the group, the group's access to information, and the origin and urgency of the problem.
    - Personality influences on decision-making include a person's value orientation (economic, aesthetic, theoretical, political, or religious), and personality traits (dominant/submissive, friendly/unfriendly, and instrumental/emotional).
    - Cultural influences on decision-making include the heterogeneity or homogeneity of the group makeup; cultural values and characteristics such as individualism/collectivism, power distance, and high-/low-context communication styles; and gender and age differences.

Exercises

1. Specific decision-making techniques may work better than others in academic, professional, and personal contexts. For each scenario, identify the decision-making technique that you think would be best and explain why.

    Scenario 1: Academic. A professor asks the class whether the final exam should be in class or taken home.

Scenario 2: Professional. A group of health professionals must decide who to nominate for a professional award.

Scenario 3: Personal. A family must decide how to divide the belongings and estate of a deceased family member who did not leave a will.

2. Of the three main problems facing group presenters, which do you think is the most challenging and why?

3. Why do you think people tasked with a group presentation (especially students) prefer to divide the parts and have members work on them independently before coming back together and integrating each part? What problems emerge from this method? In what ways might developing a master presentation and then assigning parts to different speakers be better than the more divided method? What are the drawbacks to the master presentation method?

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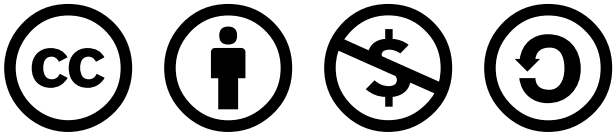
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CHAPTER 9: INTERPROFESSIONAL COMMUNICATION

Interprofessional communication refers to exchanging information and ideas between healthcare professionals involved in patient care. This includes physicians, nurses, pharmacists, social workers, physical therapists, occupational therapists, and other health care professionals.

Effective interprofessional communication is essential for providing high-quality patient care and improving client outcomes. It involves sharing information, discussing treatment options, and coordinating care among professionals to ensure that clients receive comprehensive and coordinated care.

Interprofessional communication can occur in various settings, including face-to-face meetings, phone calls, emails, and electronic health records. It requires clear and concise communication, active listening, mutual respect, and a willingness to collaborate and learn from each other.

In addition to improving patient outcomes, effective interprofessional communication can lead to better job satisfaction, reduced stress among healthcare professionals, and improved efficiency and cost savings for healthcare organizations. In this chapter, we will review Interprofessional communication and collaboration, the factors that influence interprofessional communication, resources to facilitate interprofessional communication and the importance of self-reflection.

9.1 Interprofessional Communication and Collaboration

Learning Objectives

- Explain the relevance of interprofessional communication within interprofessional collaboration.
- Describe the National Interprofessional Competency Framework
- Summarize the principles and strategies of interprofessional communication.

Interprofessional communication involves verbal, written, and nonverbal communication. **Verbal communication** may include conversations between two or more interprofessional team members, usually in person.

Written communication in the interprofessional context commonly includes documentation notes in a client's chart, such as progress notes, physician orders, medication administration records, diagnostic reports, referral letters, and discharge notes. Other examples may include faxes and emails, and text messages.

Finally, **nonverbal communication** in the interprofessional context involves meaning and interpretation conveyed through body language such as facial expressions, eye contact, body position, and gestures. Awareness of your body language and ensuring it aligns with your verbal language is essential.

Effective interprofessional collaboration fosters effective teamwork among members of an interprofessional client care team to optimize client outcomes (Canadian Interprofessional Health Collaborative (CIHC), 2010), ensuring that clients are safe throughout the health care system (Canadian Nurses Association, n.d.).

Because of the significance of interprofessional collaboration, the Canadian Interprofessional Health Collaborative (CIHC) has developed a National Interprofessional Competency Framework, as shown below.

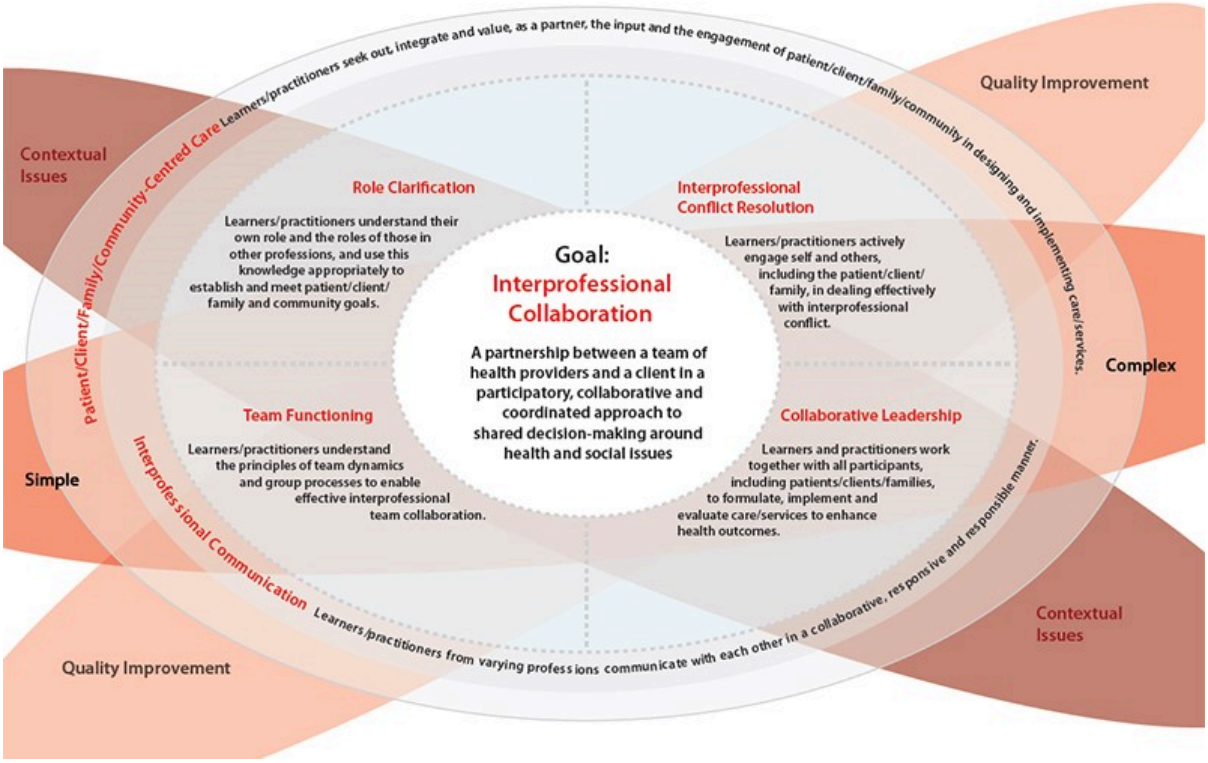


Figure 9.1.1. Interdependent competency domains for interprofessional collaboration. Image Description (see Appendix A 9.1.1).

Six **interdependent competency domains** have been identified to achieve the goal of interprofessional collaboration (CIHC, 2010). These are defined as the "knowledge, skills, attitudes, and values that shape the judgements essential for interprofessional practice" (CIHC, 2010, pg. 9) and include:

1. Interprofessional communication
2. Patient/client/family/community-centred care
3. Role clarification
4. Team functioning
5. Interprofessional conflict resolution
6. Collaborative leadership

The first two competencies have a vital influence in all healthcare situations, so as shown in the figure, they encircle the other four competencies. This framework can assist you in contributing to an effective healthcare team functioning with a focus on communication and working together collaboratively.

The competency domain of interprofessional communication is central to interprofessional collaboration because it supports the other five competency domains (CIHC, 2010).

To fulfill the interprofessional communication competency, nurses and all health care professionals must develop the capacity to "communicate with each other in a collaborative, responsive and responsible manner" (CIHC, 2010, p. 16). This means that each healthcare professional is responsible for engaging in effective communication in the specific clinical and interprofessional context respectfully, explicitly, and transparently (Lyndon et al., 2011). It is essential to actively respond to the perspectives of everyone involved, including the client and other healthcare professionals. Following are some strategies for effective interprofessional communication, adapted from the CIHC (2010).

Descriptors	Explanation
"Establish teamwork communication principles" (p.16).	**Explanation:** A clear set of communication principles and procedures is essential for healthcare teams that work closely and depend on each other. These principles and procedures can foster open and creative discussions, recognition and appreciation of each person's role and contribution, and transparency in decision-making.
"Actively listen to other team members" (p. 16).	**Explanation:** Active listening involves closely attending to what another person is saying and responding to them based on what they said.
"Communicate to ensure common understanding of care decisions" (p. 16).	**Explanation:** Each health care professional is responsible for communicating and clarifying discussions, changes in client condition, reasons for those changes or clarifying a written order or client care plan when it is unclear.
"Develop trusting relationships with clients/ families and other team members" (p. 16).	**Explanation:** Trust among the healthcare team (including clients/ families) is integral to communication. Part of building trust begins with your interactions with each other. It is essential to engage with others in respectful ways and provide time for discussion. Additionally, it is essential to be honest in your communication. You should aim to be knowledgeable on the topic, and if you are not, open up the discussion in a way that addresses this and allows for a learning opportunity.
"Effectively use information and communication technology to improve interprofessional client/ community-centred care" (p. 16).	**Explanation:** Information and communication technology involving telephone, computers, and software programs can facilitate communication. You will commonly use computer-based documentation systems to document your assessments and plans of care. You must document clearly and follow your profession's Documentation Standards of Practice.

Consistent execution of successful communication requires attentive listening skills, administrative support, and collective commitment (Lyndon et al., 2011). Other principles of interprofessional communication include:

- Speak clearly with appropriate vocal intonation and at a moderate pace
- **K**eep **I**t **S**imple and **S**traightforward (K.I.S.S. method)
- Maintain eye contact and show confidence in what you are saying
- Be efficient in your communication

- Incorporate adequate, relevant, and timely information
- Engage in active listening and ask questions for clarification
- Speak up and seek clarification until your concern regarding a client is addressed
- Put clients first: always remember (and if appropriate, remind your interprofessional team members) that your decisions and actions affect the client; the client should be the focus of your discussions

Activity: Check Your Understanding



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Key Takeaways

- Interprofessional communication occurs between members of various professions, including the client/family.
- Interprofessional communication is a fundamental component of interprofessional collaboration and optimizing client outcomes.
- Effective interprofessional communication and collaboration enhance client outcomes.
- The Canadian Interprofessional Health Collaborative has developed a National Interprofessional Competency Framework comprised of six interdependent competency domains.

Exercises

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An interactive H5P element has been excluded from this version of the text. You can view it online here:
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Image Attributions

Figure 9.1.1 Canadian Interprofessional Health Collaborative. (2010). *A national interprofessional competency framework* https://phabc.org/wp-content/uploads/2015/07/CIHC-National-Interprofessional-Competency-Framework.pdf

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9.2 Factors Influencing Interprofessional Communication

Learning Objectives

- Discuss factors that influence interprofessional communication.
- Discuss communication strategies that influence interprofessional communication in negative ways.

Several factors can influence interprofessional communication positively or negatively and can have varying effects on healthcare professionals and client outcomes.

The factors affecting interprofessional communication can be divided into three main categories: those related to the **physical environment**, those related to the **context**, and those related to the **communication styles** of the people involved.

You should consider these factors and how to modify your communication patterns for effective interprofessional communication.

First, you will often be working in physical environments that are sometimes noisy and have many moving parts, including clients, families, and multiple members of interprofessional teams. In addition to the many people, there may be beeping machines and overhead announcements. You should be aware that this can cause sensory overload: health care environments are often unfamiliar for clients and their families, so you should consider this.

Second, interprofessional communication in healthcare environments occurs in a

complex context involving a lot of information and dynamic and complex clinical situations requiring a high acuity level. Healthcare professionals often work in fast-paced and high-pressure environments, making it challenging to communicate effectively. Time constraints may prevent professionals from communicating thoroughly, leading to errors or misunderstandings. It can be very intense, with life-threatening conditions, death, uncertainty, fear, and anxiety – and can lead to work overload. This context can also influence the dynamic nature and intensity of interprofessional conversations.

The hierarchical relationships in interprofessional teams and imbalances of power or ideas about power can also affect how individuals communicate and interpret conversations. You must communicate compassionately and systematically. The healthcare organization's culture can impact how professionals communicate with each other. For instance, a culture of blame or punishment for mistakes can discourage open communication and transparency.

Personal biases such as stereotypes or prejudices can impact how professionals communicate. For example, a nurse may make assumptions about a physician's competence based on race or gender. Professionals from different disciplines may have different goals and priorities, impacting communication. Communication can become fragmented or ineffective without a shared understanding of goals and priorities.

Third, each group of healthcare professionals has its own culture and communication styles, which may not align with those of other healthcare professionals. For example, nurses are often taught to be descriptive and embed narrative elements in their communication. This descriptive style capitalizes on a comprehensive and storied approach. Other healthcare professionals, such as physicians and pharmacists, are taught to be more concise and efficient. As you can imagine, these two communication styles may not always align, so you should reflect on how to tailor your communication to the person or group you are speaking with while still communicating your point of view. Education and communication skills training can be crucial in improving interprofessional communication. Without sufficient training, professionals may lack the skills and knowledge necessary to communicate effectively with each other.

Some examples of ineffective interprofessional communication and strategies to manage each are presented below (*HCP = health care professional).

Example	Effects	How to manage this type of communication
Disrespectful communication **HCP #1:** "It's 11:00 a.m. already!" [shakes head in disapproval] "Goodness gracious, you haven't got her out of bed yet?! What's wrong with you?"	Demoralizes and demeans another person. Although there may be a reason why the client was not helped out of bed, the healthcare professional may feel disempowered and not share the information.	**HCP #2** could respond: "It is probably better for you to inquire why I have not gotten the client out of bed. Your communication is disrespectful and disregards what is going on with Mrs. Hart. Would you like to know what is going on?" Alternatively, **HCP #1**, who was initially disrespectful, could have engaged in a discussion guided by inquiry instead of blame and said: "I noticed Mrs. Hart is not out of bed yet. How can I help?"

Example	Effects	How to manage this type of communication

		When communicating, it is essential to explicate and emphasize when you have concerns and make sure that the individual that you are discussing it with recognizes the importance of what you are saying.
Failure to communicate concern. **HCP #1:** "The client's BP is 140/88" **HCP #2:** "Okay."	The first healthcare professional stated a finding but did not indicate or emphasize their concern. Thus, the second healthcare professional did not recognize the need to be concerned or engage in a dialogue. Failure to communicate one's concerns can have a negative effect on patient outcomes.	For example, the conversation could be modified such that the concern is acknowledged, and they engage in a discussion about the plan of care: **HCP #1:** "The client's BP is 140/88. This is unusual for this client; their baseline BP is 100/60. I am concerned about the high BP and think we should intervene." **HCP #2:** "That is quite a jump. Is the client's pain well-controlled?"
Example	**Effects**	**How to manage this type of communication**

Failure to communicate the rationale for an action or decision. **HCP #1:** "Let's try putting the client in the prone position." **HCP #2:** "You want us to roll the client onto their abdomen?" **HCP #1:** "Yes." **HCP #2:** "I think that will be difficult."	The communication is not dialogical because of the failure to communicate a rationale for an action or decision by either of these professionals. As a result, neither professional understands the perspective of the other.	When communicating, it is essential to provide the rationale for your actions and decisions. For example, the conversation could be modified so that each person's rationale is identified: **HCP #1:** "Let's try putting the client in the prone position. Some recent research has suggested that this can improve respiratory function when a client has severe respiratory distress that is not responding to other interventions." **HCP #2:** "I am concerned about rolling the client onto their abdomen with all the tubes and wires. Do you have a suggestion?" **HCP #1:** "If you are open to it, I can get one more person, and we can do it as a team. What do you think?"
Example	**Effects**	**How to manage this type of communication**

Unclear/incomplete communication or miscommunication. **HCP #1:** "Can you help Ms. Di Lallo with her breakfast?" **HCP#2:** "Yes" **HCP#1:** "She's at Table 1." **HCP#2:** [walks over to the client], "Hi, Ms. Di Lallo. Are you ready for your breakfast?" **Client:** "Yes, can you please pass me my coffee?" **HCP#2:** [passes Ms. Di Lallo her coffee]. **HCP#3:** "Oh, hold on! Ms. Di Lallo, I need to thicken your coffee first."	This unclear communication about the client's diet led to a near miss. Unclear, incomplete, or miscommunication can result in client care errors and have serious consequences for their health.	When communicating, it is important to include all pertinent information to provide safe, effective care. All healthcare professionals need to clarify any communication shared. For example, the conversation could be modified by ensuring communicating all the required information: **HCP#1:** "Can you help Ms. Di Lallo with her breakfast?" **HCP#2:** "Yes" **HCP#1:** "Great, she's at Table 1. Ms. Di Lallo has dysphagia, so you need to make sure all her fluids are thickened and follow the dysphagia diet protocol. The thickener should be on her tray. Do you have any questions?" **HCP#1:** "No, I'm aware of the dysphagia diet protocol and will monitor Ms. Di Lallo during her meal."
Example	**Effects**	**How to manage this type of communication**

Ineffective conflict resolution on a plan of care.

HCP#1: "Mr. Pink said he does not feel ready to be discharged, and I agree."

HCP#2: "I think I can determine when Mr. Pink can be discharged, considering I have been working with him for six months, and you just met him last week."

HCP#1: "We must talk to the whole team."

The communication is ineffective because the HCPs disagree about the client's care plan. They are not focusing on the context of the interprofessional communication and/or explaining their reasoning based on the client's needs. They focus on their opinions instead of using a client-centred perspective and evidence-informed approach.

In the case of a disagreement, HCPs need to effectively explain their reasons in the context of client-centred care and evidence-informed approaches. It's always important to use effective conflict resolution strategies.

For example, the conversation could be modified as follows:

HCP#1: "Mr. Pink said he is not ready to be discharged. I agree with him because he has no support system to help him with his activities of daily living at home."

HCP#2: "I believe he is physically and mentally ready to go home, but you make a good point. Let's put together a plan for home care."

HCP#1: "Great."

Key Takeaways

- Several factors influence interprofessional communication, including the physical environment, context, and communication styles.
- Respectful interprofessional communication and interaction are essential to safe and effective work environments, including healthcare settings.

Exercises

1. Identify the factors influencing your professional communication and how you modify communication patterns to engage in effective interprofessional communication.

2.

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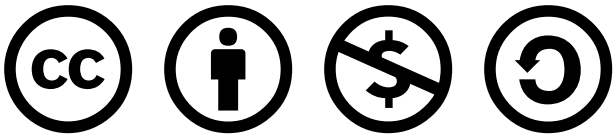
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9.3 Resources to Facilitate Interprofessional Communication

Learning Objectives

- Describe two evidence-based communication tools that can be used to facilitate effective interprofessional communication.
- Explain why standardized communication tools are used among health care professionals.
- Describe resources available to facilitate interprofessional communication.

There are numerous resources to facilitate interprofessional communication and collaboration.

Ideally, all healthcare professionals would speak up for the sake of patients, clearly state what they think is happening in a specific situation, and explain what and why they think certain actions should be taken (Lyndon et al., 2011). However, some healthcare professionals may struggle to voice their concerns and perspectives. It is important for healthcare professionals to find their voice, speak up and share their opinions (Canadian Medical Protective Association, 2011). One objective of interprofessional communication tools is to provide structure and clarity to convey succinct, comprehensive, and relevant information to another healthcare professional to improve client care.

Several standardized (evidence-based) tools have been developed to facilitate interprofessional communication, support effective, timely collaboration within and across teams, prevent errors in the workplace and avoid potential miscommunication (Canadian Medical Protective Association, 2011).

ISBAR, is one standard communication tool that can facilitate effective verbal communication when communicating with another health care professional about a client or during handover. It provides a framework so that communication is focused, concise, and complete. This section will discuss a few communication tools that may be used in various health care environments to enhance communication and increase client outcomes.

ISBAR

ISBAR is an acronym for **Introduction**, **Situation, Background, Assessment, and Recommendation** (Shah, 2016). The military first introduced it in the United States to facilitate communication (NHS Improvement, n.d.) and has since been taken up in the healthcare arena to enhance client safety by facilitating clear and concise communication among healthcare professionals and ensuring the most essential information is included (NHS improvement, n.d.; Spooner et al., 2016). The components of ISBAR are shown in the table below. It is essential to reflect on how you communicate and how you can improve communication through the comprehensive use of such evidence-based tools.

Components of ISBAR	**Information expected in the respective components**
Introduction	The sender (health care professional) states who they are and the client they discuss.
Situation	The health care professional states what has happened, i.e. presenting the client's chief complaints, symptoms, mechanism of the injury or change in client status.
Background	The sender conveys other information related to the chief complaint, past medical history, medication history, and allergies.
Assessment	The sender may provide details regarding the Glasgow Coma Scale (GCS), the latest vital signs, trends, and physical examination findings, a brief assessment of the overall client status, the most probable diagnosis, and what action and treatment have been provided so far.
Recommendations	Based on their interaction with the client, the sender finally states their recommendations for immediate actions, mentions whether the client is time critical, and ensures the recipient reads back and understands the information conveyed.

Interprofessional communication is a fundamental component of interprofessional

collaboration and optimizing client outcomes. Several factors influence interprofessional communication, including the physical environment, context, and communication styles. Respectful interprofessional communication and interaction are essential to safe and effective work environments, including healthcare settings. ISBAR is a commonly used tool that can facilitate effective communication with other health care professionals, but awareness of one's communication style and values helps facilitate interprofessional communication. Using ISBAR effectively takes practice. The following video provides an example of what to consider when using ISBAR.

Watch: ISBAR Patient Safety



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=2833#oembed-1

Other communication strategies with easy-to-remember acronyms are **I Pass the Baton, and TeamSTEPPS**:

I Pass the Baton

Introduction: Introduce yourself, your role and the client.

Patient/Client: Name, identifiers, age, sex, location.

Assessment: Present chief complaint, vital signs, symptoms and diagnosis.

Situation: Current status/circumstances, including code status, level of uncertainty, recent changes and response to treatment.

Safety: Critical lab values/reports, socioeconomic factors, allergies and alerts (falls, isolation, etcetera).

THE

Background: Comorbidities, previous episodes, current medications, and family history.

Actions: Explain what actions were taken or are required. Provide rationale.

Timing: Level of urgency, timing, and prioritization of actions.

Ownership: Identify who is responsible (person/team), including the client's family members.

Next: What will happen next? Anticipated changes? What is the plan? Are there contingency plans?

(Agency for Healthcare Research and Quality, 2013).

TeamSTEPPS

Team Strategies and Tools to Enhance Performance and Patient Safety **(TeamSTEPPS)** is an evidence-based framework to enhance performance across healthcare teams and systems. It has five key principles: team structure and four teachable-learnable skills. The skills are communication, leadership, situation monitoring, and mutual support (Agency for Healthcare Research and Quality, 2013).

Other Types of Resources

Additional resources used to facilitate interprofessional communication and collaboration include:

Simulation-based training: Simulation-based training involves scenarios to help healthcare professionals develop and practice communication and teamwork skills in a safe and controlled environment. This type of training allows healthcare professionals to learn from their mistakes and receive feedback from their peers and instructors.

Electronic Health Record (EHR) systems: EHR systems can facilitate

interprofessional communication by giving healthcare professionals real-time access to patient information, allowing them to collaborate and make informed decisions about patient care.

Interprofessional rounds involve healthcare professionals from different disciplines coming together to discuss patient cases and make collaborative decisions about client care. These rounds can help improve communication and collaboration among healthcare professionals.

Professional development opportunities: Healthcare professionals can benefit from attending professional development opportunities, such as workshops, conferences, and seminars that focus on developing communication and collaboration skills.

Overall, effective interprofessional communication is essential in health care. Healthcare professionals can benefit from utilizing communication tools, participating in interprofessional education programs and simulation-based training, using electronic health record systems, engaging in interprofessional rounds, and attending professional development opportunities to facilitate communication and collaboration.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=2833#h5p-50

Key Takeaways

- Evidence-based communication tools such as ISBAR, I Pass The Baton, and TeamSTEPPS can be

used to facilitate interprofessional communication.

- Awareness of one's communication styles and values helps facilitate interprofessional communication.
- Utilizing additional resources such as communication tools, participating in interprofessiona education programs and simulation-based training, using electronic health record systems, engaging in interprofessional rounds, and attending professional development facilitates interprofessional communication and collaboration.

Exercises

Complete an SBAR using the following scenario:

Zina Mills, a 75-year-old female admitted five days ago for a hip fracture. She had surgery three days ago. The incision is clean and intact. Physio has been attempting to get her out of bed and mobile. Her mobility is limited due to dementia. Her appetite has been poor, with an intake of solid food at less than 50% at each meal and fluid intake is 600 ml/24 hours. She has a history of hypertension. She has been experiencing shortness of breath with a productive cough and green mucous for the past 24 hours. Her vital signs are: 0_2 sat is 90% with 4L oxygen via nasal prongs, respiratory rate is 26, temperature is 38.3, pulse 98, blood pressure 134/88.

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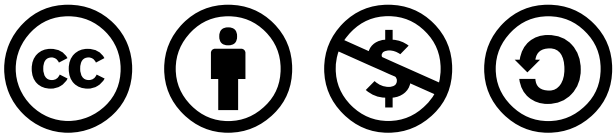
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9.4 Self-Reflection in Interprofessional Communication

Learning Objectives

- Examine the role of self-reflection in interprofessional communication.

You are responsible for your communication, actions, and behaviours in a professional workplace setting. You should begin by engaging in the practice of self-reflection. Start by thinking about your values concerning communication. What factors do you believe are essential in shaping how you communicate effectively? How do you speak with others? What bothers you or empowers you within a communication encounter? What are your strengths when communicating with another person? What are some areas for improvement in your communication? Consider how your strengths and barriers may influence a communication encounter. For example, how do barriers influence your capacity to engage in communication and your capacity to deliver and receive a message?

Your communication barriers may be very personal and developed as a child. Reflect on the following questions:

- Do you rely on informal speaking patterns, such as slang, colloquialisms, and abbreviations (e.g., “What’s the bottom line?” or “Come again?”)?
- Do you engage in excessively using first-person pronouns or delaying expressions (e.g., “I think that maybe, well, I wonder if the person needs to be assisted, you know?”)?
- Do you get nervous when speaking to another person or in a group? If so, how

does that affect your communication? Do you avoid talking or stumble over your words? Do you avoid eye contact?
- Do you speak quietly to the extent that others have difficulty hearing you?
- Do you have communication quirks such as saying “like” or “umm” a lot?
- Do you become distracted quickly and lose your point when talking?
- Do you lack focus, go on an unrelated tangent, and talk too much?
- Do you rely on jargon-words or expressions used by a particular profession or group that are difficult for others to understand.?
- Do your emotions influence your capacity to engage in communication effectively?
- Are there any cultural differences that might affect your communication with another person?
- Do you feel you lack credibility?
- How do you feel about speaking up on issues you are concerned about when people around you do not share the same view?
- Are you comfortable seeking a resolution with another individual that has authority or power?

Next, reflect on the professional values of communication and what you strive to achieve. You may consider these in the context of health studies students within your chosen professional practice area and what is expected of you. For example, professional competencies often involve being a communicator, an advocate, a collaborator, and a leader (College of Nurses of Ontario [CNO], 2018). Each role will require you to communicate and use various strategies, including conflict resolution, to “create and maintain professional relationships” (CNO, 2018, p. 6).

Some of your communication barriers may be related to your professional capacity. Reflect on the following points:

1. **Practice positive self-talk**. Healthcare professionals are often hyper-aware of their errors and assume our colleagues are as well. Consider what contributes to your self-perception as a professional — what is realistic and what is exaggerated?
2. **Ensure consistency in verbal and nonverbal communication** — reflect on how your nonverbal reactions correspond with the interprofessional context and the verbal communication. Do your thoughts pervade your actions and

get inadvertently communicated to others?

3. **When possible, start by speaking with the colleague with whom you are in conflict**. Gossip and rumours often begin with the compulsion to share. Are you more likely to talk to someone directly or talk to others about a problem? Use "I" statements when possible. These statements require you to express what you think or feel instead of simply projecting on a colleague or (mis) identifying their motives/behaviours.

Key Takeaways

- Awareness of one's communication styles and values helps facilitate interprofessional communication.

Exercises

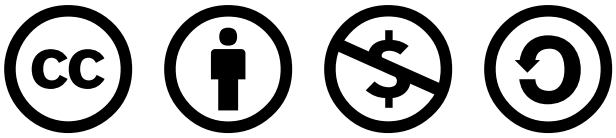
1. What do you see as collaborative behaviour within an interprofessional encounter? How can you be confident that other individuals clearly understand your communication in a teamwork setting (especially those who have a different training background)? How can you help others understand your role?
2. Think of a situation in which you were able to respond assertively and nonassertively to someone in a professional environment. What factors aided or hindered your ability to be assertive?

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CHAPTER 10: INTERPERSONAL CONFLICT

Which of your relationships contains the most conflict right now? Your answer to this question probably depends on the various contexts in your life. If you live with family, you may have daily conflicts as you try to balance your autonomy with the practicalities of living under your family's roof. Or, if you live with friends, you may negotiate roommate conflicts. You probably also have experience in managing conflict in romantic relationships and the workplace. Think back and ask yourself, "How well do I handle conflict?" As with all areas of communication, we can improve if we have the background knowledge to identify relevant communication phenomena and the motivation to reflect on and enhance our communication skills. In this chapter, we will explore interpersonal conflict, describe common conflict management styles and conclude with some guidance on effectively managing conflict.

10.1 Understanding Conflict

Learning Objectives

- Define interpersonal conflict.
- Explain the types of conflict resolution styles.
- Explain the importance of effective conflict management.
- Explain the types of unsupportive messages that are commonly used in conflict situations.

A behavioural question job applicants often hear during a job interview is, “How would you handle a conflict situation with a customer or coworker?” Would you know how to answer this question appropriately and thoroughly? It is a good question because conflict indeed happens in the workplace. The potential for conflict exists anywhere two or more motivated people interact. When otherwise good people lose themselves in an argument, knowing how to deal with such situations is a vital workplace skill to prevent workplace violence (Thompson et al., 2022).

Interpersonal conflict occurs in interactions with real or perceived incompatible goals, scarce resources, or opposing viewpoints. Interpersonal conflict may be expressed verbally or nonverbally, ranging from a nearly imperceptible cold shoulder to a very obvious blowout. Interpersonal conflict is, however, distinct from interpersonal violence, which goes beyond communication to include abuse.

Conflict is inevitable in close relationships and can take a negative emotional toll. It takes effort to ignore someone or be passive-aggressive; the anger or guilt felt after blowing up at someone are valid negative feelings. However, conflict is not always negative or unproductive. Numerous research studies have shown that the quantity of conflict in a relationship is not as significant as how the conflict is handled. Additionally, when conflict is well managed, it has the potential to lead to more rewarding and satisfactory relationships (Canary & Messman, 2000).

Conflict Resolution Communication Style

In addition to verbal and nonverbal communication, people communicate with others using three styles. A **passive communicator** puts the rights of others before their own. Passive communicators tend to be apologetic or tentative when speaking and often do not speak up if they feel they are being wronged. **Aggressive communicators**, on the other hand, come across as advocating for their rights despite possibly violating the rights of others. They tend to communicate in a way that tells others their feelings do not matter. However, assertive communicators respect the rights of others while also standing up for their ideas and rights when communicating. An assertive person is direct but not insulting or offensive. **Assertive communicators** convey information that describes the facts and the sender's feelings without disrespecting the receiver. Using "I" messages such as "I feel … ," "I understand … ," or "Help me to understand … " are strategies for assertive communication.

This method differs from aggressive communication, which uses "you" messages and can feel as if the sender is verbally attacking the receiver rather than dealing with the issue. For example, instead of saying to a coworker, "Why is it always so messy in your patients' rooms? I dread following you on the next shift!" an assertive communicator would use "I" messages to say, "I feel frustrated spending the first part of my shift decluttering our patients' rooms. Can you help me understand why keeping things organized during your shift is challenging?" Assertive communication is an effective way to solve problems with patients, coworkers, and healthcare team members.

Language and Conflict

At the interpersonal level, unsupportive messages can make others respond defensively, leading to feelings of separation and actual separation or dissolution of a relationship. It is impossible to be supportive in our communication all the time, but consistently unsupportive messages can hurt others' self-esteem, escalate conflict, and lead to defensiveness. People who regularly use unsupportive messages may create a toxic win/lose climate in a relationship. Six verbal tactics

that can lead to feelings of defensiveness and separation are global labels, sarcasm, dragging up the past, negative comparisons, judgmental "you" messages, and threats (McKay et al., 1995).

Common Types of Unsupportive Messages

Global labels. "You are a liar." Labelling someone irresponsible, untrustworthy, selfish, or lazy calls their whole identity into question. Such sweeping judgments and generalizations are sure to escalate a negative situation.

Sarcasm. "No, you did not miss anything in class on Wednesday. We just sat here and looked at each other." Even though sarcasm is often disguised as humour, it usually represents passive-aggressive behaviour through which a person indirectly communicates negative feelings.

Dragging up the past (gunnysacking). "I should have known not to trust you when you never paid me back that $100 I let you borrow." Bringing up negative past experiences is a tactic people use when they do not want to discuss a current situation. Sometimes people have built up negative feelings that are suddenly let out by a seemingly small thing.

Negative comparisons. "Jade graduated from college without any credit card debt. I guess you are just not as responsible as her." Holding a person up to another person's supposed standards or characteristics can lead to feelings of inferiority and resentment. Parents and teachers may unfairly compare children to their siblings.

Judgmental "you" messages. "You are never going to be able to hold down a job." Accusatory messages are usually generalized overstatements about another person that goes beyond labelling but do not describe specific behaviour in a productive way.

Threats. "If you do not stop texting back and forth with your ex, you will regret it." Threatening someone with violence or some other negative consequence usually signals the end of productive communication. Aside from the potential legal consequences, threats usually overcompensate a person's insecurity. These types of messages can lead to conflict. If warranted, it is important to understand how you respond to the conflict to work toward a more productive style.

Key Takeaways

- Conflict is inevitable
- Conflict does not always have to be perceived as negative
- Assertive communication is preferable when communicating during a perceived conflict situation
- Unsupportive messages to be avoided during conflict include global labels, sarcasm, digging up the past, negative comparisons, judgemental language and threats.

Exercises

1. Review the list of unsupportive messages and reflect on which ones you commonly use personally and professionally. Why do you use them?
2. How might you handle conflict differently in a personal and professional context?
3. What is the difference between passive, aggressive and assertive communication?

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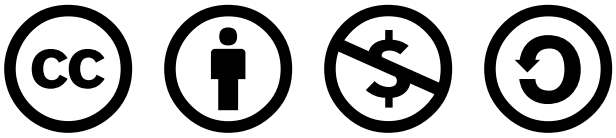
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10.2 Conflict Management Styles

Learning Objectives

- Explain a tool used to mitigate conflict.
- Identify five conflict management styles.
- Describe the collaborative problem-solving approach to conflict resolution.

Would you describe yourself as someone who prefers to avoid conflict? Do you like to get your way? Are you good at working with someone to reach a mutually beneficial solution? Odds are that you have been in situations where you could answer yes to each of these questions, which underscores context's critical role in conflict and conflict management styles. The way you view and deal with conflict is learned and contextual. Is how you handle conflicts similar to how your parents handle conflict? If you are of a certain age, you are likely predisposed to answer this question with a certain "No!" As a child, you likely tested out different conflict resolution styles observed in your families with your parents and siblings. Later, in adolescence, you begin developing platonic and romantic relationships outside the family; you may test what you have learned from your parents in other settings. If a child has observed and used negative conflict management styles with siblings or parents, they are likely to exhibit those behaviours with non–family members (Reese-Weber & Bartle-Haring, 1998).

Different conflict management styles are communication strategies that attempt to avoid, address, or resolve a conflict. Keep in mind that you do not always consciously choose a style. You may instead be caught up in emotion and become reactionary. Strategies for managing conflict more effectively may allow you to slow down the reaction process, become more aware, and intervene to improve

your communication. A powerful tool to mitigate conflict is information exchange. Asking for more information before you react to a conflict-triggering event is an excellent way to add a buffer between the trigger and your reaction. Another critical element is whether or not a communicator is oriented toward self-centred or other-centred goals. For example, if your goal is to "win" or make the other person "lose," you show a high concern for yourself and a low concern for others. If you aim to facilitate a "win/win" resolution or outcome, you show great concern for yourself and others.

In general, strategies that facilitate information exchange and include concern for mutual goals will be more successful at managing conflict (Sillars, 1980). This section will discuss the five strategies for managing conflict. Each of these conflict styles accounts for the concern placed on ourselves versus others.

Conflict Management Styles

To better understand the elements of the five conflict management styles, you will apply each to the following scenario. Rosa and D'Shaun have been partners for 17 years. Rosa is growing frustrated because D'Shaun continues to give money to their teenage daughter, Casey. There have been times when Rosa and D'Shaun have stated, "it is okay this time," even though they decided to keep the teen on a fixed allowance to teach her more responsibility. Rosa has considered threatening to take D'Shaun's ATM card away if he continues giving Casey money. While conflicts regarding money and child-rearing are prevalent, you will see how Rosa and D'Shaun could address this problem. As they discuss the issue, Rosa uses a sarcastic tone of voice and subsequent eye roll when telling D'Shaun, "You are so good with money!" Rosa also leaves the bank statement on the kitchen table in hopes that D'Shaun will realize how much extra money is being given to Casey.

Competing

The competing style indicates a high concern for self and a low concern for others. When you compete, you strive to "win" the conflict, potentially at the expense or "loss" of the other person. You may gauge our win by being granted or taking

concessions from the other person. For example, if D'Shaun gives Casey extra money behind Rosa's back, he is taking an indirect competitive route resulting in a "win" for him because he got his way. The competing style also involves using power, which can be noncoercive or coercive (Sillars, 1980). Noncoercive strategies include requesting and persuading. When requesting, you suggest the conflict partner change a behaviour. Requesting does not require a high level of information exchange. When you persuade, however, you give your conflict partner reasons to support our request or suggestion, meaning there is more information exchange, which may make persuading more effective than requesting.

Rosa could persuade D'Shaun to stop giving Casey extra allowance by bringing up their fixed budget or reminding him they are saving for a summer vacation. Coercive strategies violate standard guidelines for ethical communication. They may include aggressive communication directed at stirring your partner's emotions through insults, profanity, yelling, or threats of punishment if you do not get your way. If Rosa is the primary income earner in the family, she could use that power to threaten to take D'Shaun's ATM card away if he continues giving Casey money.

In all these scenarios, the "win" that could result is only short-term and can lead to conflict escalation. Interpersonal conflict is rarely isolated, meaning ripple effects can connect the current conflict to previous and future conflicts. D'Shaun's behind-the-scenes money-giving or Rosa's confiscation of the ATM card could lead to negative emotions that could further test their relationship. Competing has been linked to aggression, although the two are not always paired.

If assertiveness does not work, there is a chance it could escalate to hostility. There is a pattern of verbal escalation: requests, demands, complaints, angry statements, threats, harassment, and verbal abuse. Aggressive communication can become patterned, creating a volatile and hostile environment.

Living in this volatile environment would create stressors in any relationship, so it is essential to monitor competition as a conflict resolution strategy to ensure it does not lapse into aggression. The competing conflict management style is not the same as having a competitive personality. Competition in relationships is not always negative, and people who enjoy engaging in competition may not always do so at the expense of another person's goals. Research has shown that some couples engage in competitive shared activities like sports or games to maintain

and enrich their relationship (Dindia & Baxter, 1987). And although you may think that competitiveness is gendered, research has often shown that women are just as competitive as men.

Avoiding

The avoiding style of conflict management often indicates a low concern for self and a low concern for others, and no overt or direct communication about the conflict takes place. However, in some cultures that emphasize group harmony over individual interests (including some in North America), avoiding a conflict can indicate a high concern for the other. Remember, you can not avoid communication — even when you try to avoid conflict, you may intentionally or unintentionally give away your feelings through verbal and nonverbal communication. Rosa's sarcastic tone when telling D'Shaun, "You are so good with money!" and subsequent eye roll bring the conflict to the surface without specifically addressing it. The avoiding style is either passive or indirect, which may make this style less effective than others.

You may decide to avoid conflict for many reasons, some of which are better than others. If you view the conflict as unimportant, it may be better to ignore it. If the person with whom you are in conflict will only be in contact with you for a week, you may perceive a conflict as temporary and choose to avoid it, hoping it will solve itself. If you are not emotionally invested in the conflict, you may be able to reframe your perspective and see the situation differently, resolving the issue. In all these cases, avoiding does not require an investment of time, emotion, or communication skills, so there is not much at stake to lose. However, it may be easy to tolerate a problem when you are not personally invested in it or view it as temporary. When faced with a situation like Rosa's and D'Shaun's, avoidance may worsen the problem. For example, avoidance could manifest as changing the subject and progressing from avoiding the issue to avoiding the person altogether to ending the relationship.

Indirect strategies of hinting and joking also fall under the avoiding style. When you hint, you drop clues that you hope your partner will find and piece together to see the problem and hopefully change, thereby solving the problem without direct communication. However, the person dropping the hints often overestimates their

partner's detective abilities. For example, when Rosa leaves the bank statement on the kitchen table in hopes that D'Shaun will realize how much extra money is being given to Casey, D'Shaun may simply ignore it. You also overestimate our partner's ability to decode the jokes youmake about a conflict situation. It is more likely the receiver of the jokes will think you are genuinely trying to be funny or feel provoked or insulted than realize the conflict situation you are referencing. More frustration may develop when the hints and jokes are not accurately decoded, often leading to a more extreme form of hinting/joking: passive-aggressive behaviour.

Passive-aggressive behaviour deals with conflict in which one person indirectly communicates negative thoughts or feelings through nonverbal behaviours, such as not completing a task. For example, Rosa may wait a few days to deposit money into the bank so D'Shaun can not withdraw it to give to Casey. Although passive-aggressive behaviour can feel rewarding at the moment, it is one of the most unproductive ways to deal with conflict. However, as noted above, avoidance can be appropriate in some situations — for example, when the conflict is temporary, when the stakes are low, when there is little personal investment, or when there is the potential for violence or retaliation.

Accommodating

The accommodating conflict management style indicates a low concern for self and a high concern for others. It is often viewed as passive or submissive when someone complies with or obliges another. Accommodating entails doing what the other wants, whereas avoiding is doing nothing. It should be noted that sometimes avoiding often leads to accommodating indirectly, as not addressing a problem or voicing your opinion can lead others to perceive that you are okay with doing things their way.

The context for and motivation behind accommodating play an essential role in whether or not it is an appropriate approach. Generally, you accommodate because you are being generous, obeying, and yielding (Bobot, 2010). If you are being generous, you accommodate because you genuinely want to. If you obey, you do not have a choice but to accommodate (perhaps due to the potential for negative consequences or punishment). If you yield, you may have your own views or goals but give up due to fatigue, time constraints, or a better solution has been offered.

Accommodating can be appropriate when there is little chance that our own goals can be achieved, when you do not have much to lose by accommodating, when you feel you are wrong, or when advocating for your own needs could negatively affect the relationship (Isenhart & Spangle, 2000). The occasional accommodation can be useful in maintaining a relationship. For example, Rosa may say, "It is okay that you gave Casey some extra money; she did have to spend more on gas this week since the prices went up."

However, being a team player can slip into being a pushover, which people generally do not appreciate. If Rosa keeps telling D'Shaun, "It is okay this time," they may find themselves short on spending money at the end of the month. At that point, Rosa and D'Shaun's conflict may escalate as they question each other's motives, or the conflict may spread if they direct their frustration at Casey and blame it on her irresponsibility. The accommodating style is more likely to occur when there are time restraints and less likely to occur when someone does not want to appear weak (Cai & Fink, 2002). If you are standing outside the movie theatre and two movies are starting, you may say, "Let's just have it your way," so you do not miss the beginning of the movie. If you are a new manager at an electronics store and an employee wants to take Sunday off to watch a football game, you may say no to set an example for the other employees.

Compromising

The compromising style shows a moderate concern for self and others. Even though you may often hear that the best way to handle a conflict is to compromise, the compromising style is not a win/win solution but a partial win/lose. When you compromise, you give up some or most of what you want. The conflict gets resolved temporarily, but lingering thoughts of what you gave up could lead to a future conflict. Compromising may be a good strategy when time limitations or conflict prolonging may lead to relationship deterioration. Compromise may also be good when both parties have equal power or other resolution strategies have not worked (Macintosh & Stevens, 2008). Compromising may help conflicting parties come to a resolution, but neither may be completely satisfied if they each had to give something up.

People often get accommodating and compromising confused. Accommodating

means sacrificing your needs/wants/desires for what the other wants without them giving anything in return. When you compromise, both parties give something and gain something.

A negative of compromising is that it may be used as an easy way out of a conflict. The compromising style is most effective when both parties find the solution reasonably agreeable. Rosa and D'Shaun could decide that Casey's allowance does need to be increased and could each give her $10.00 more a week by committing to taking their lunch to work twice a week instead of eating out. They are giving up something, and if neither has a problem taking their lunch to work, the compromise is equitable. If the couple agrees that the 20 extra dollars a week should come out of D'Shaun's golf budget, the compromise is not as equitable, and D'Shaun, although he agreed to the compromise, may end up with feelings of resentment. Dialogue may assist this couple to find a win-win outcome.

Collaborating

The collaborating style involves a high degree of concern for self and others and usually indicates investment in the conflict situation and the relationship. Although the collaborating style takes the most work regarding communication competence, it ultimately leads to a win/win situation in which neither party has to make concessions because a mutually beneficial solution is discovered or created. The obvious advantage is that both parties are satisfied, which could lead to positive problem-solving in the future and strengthen the overall relationship. For example, Rosa and D'Shaun may agree that Casey's allowance needs to be increased and may decide to give her 20 more dollars a week in exchange for her babysitting her little brother one night a week. In this case, they would not make the conflict personal but focus on the situation and devise a solution that may save them money. The disadvantage is that this style is often time-consuming, and only one person may be willing to use this approach while the other person is eager to compete to meet their goals or is unwilling to accommodate.

Here are some tips for collaborating and achieving a win/win outcome (Hargie, 2011):

- Avoid viewing the conflict as a contest you are trying to win.
- Remain flexible and realize there are solutions yet to be discovered.

- Separate between the person and the problem (do not make it personal).
- Determine the underlying needs driving the other person's demands.
- Identify areas of common ground or shared interests that you can work from to develop solutions.
- Ask questions to allow them to clarify and to help you understand their perspective.

Problem-Solving

When conflict is severe enough that it causes a rift within the workplace culture, the kind that pollutes the work atmosphere and threatens irreparable damage, a methodical, collaborative approach to conflict resolution can help lead to an amicable solution. Watch the following video for strategies to effectively manage interpersonal conflict.

Watch: How to Deal With Conflict



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=2825#oembed-1

When trying to collaborate on solving a conflict, it is helpful to use the following five-step problem-solving sequence:

1. Identify the problem(s).
2. Analyze the problem(s), the causes, and the symptoms. In other words, how did the problem arise, and why are you having this conflict?
3. Identify the goals and needs of each person in the conflict. In other words, what does each person want?
4. Identify solutions that might solve the problem and meet the goals and needs of the conflict participants. Be creative and think outside the box if necessary.
5. Evaluate the solutions that were identified. When evaluating the solutions, consider the following: Will it solve the problem? Will it satisfy the goals and

needs of the conflict participants? What are some potential issues that might arise when the choice is implemented?

Key Takeaways

- Conflict management styles include accommodating, avoiding, collaborating, competing and compromising.
- People tend to have a dominant style.
- A tool to mitigate conflict is information exchange.
- Collaborative problem-solving includes five steps: Identify the problem, analyze the problem, identify goals, and identify and evaluate solutions that meet the needs of each individual.

Exercises

1. Of the five conflict management strategies, is there one you use more often than others? Why or why not? Do you think people are predisposed to one style over the others based on their personality or other characteristics? If so, what personality traits would lead a person to each style?
2. Describe a situation you recall where you came into conflict with someone else. It may be something that happened years ago or a current issue that just arose. Using the principles and strategies in this section, describe how the conflict was resolved or could have been resolved.

Media Attribution

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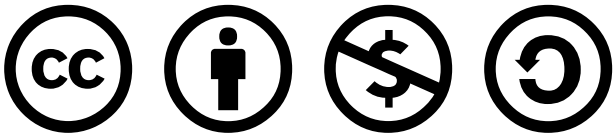
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10.3 Approaching and Responding to Interpersonal Conflict

Learning Objectives

- Explain what to consider when approaching conflict and resolution.
- Describe four conflict triggers.
- Explain the STLC [stop, think, listen, and communicate] model as a conflict management strategy.

Approaching and Responding to Conflict

While many of us think of conflict as unfavourable, it is not inherently so, and you can use effective interpersonal communication skills to manage conflict constructively. This could potentially transform a negative situation into something positive and cathartic. However, it is essential to note that conflict involves more than one person, and the other person or people may not have the knowledge or skills for effective communication. Despite this, having just one person knowledgeable in conflict management skills can help de-escalate the situation and better resolve the conflict. This section outlines how to approach a conflict situation and how to apologize in situations where you have wronged another person effectively.

Approaching Conflict

To effectively approach someone about a conflict, consider the strategies below.<

Prepare
Before approaching someone, define the problem and your goals, and brainstorm potential solutions you think will solve the problem. Also, consider how, when, and where you will approach the other person with the problem. Usually, it is best to approach someone privately versus in a public location around other people.

Take ownership
Recognize that the conflict consists of at least two people. Whether it is a disagreement or hurt feelings, both people play a role in the conflict.

Be assertive, not aggressive
Being assertive means stating the message clearly and directly while respecting the other person. Aggressiveness entails attacking another's self-esteem, blaming, expressing hostility, and name-calling. Behaving aggressively is unlikely to yield the results you want.

Start with facework
Facework strategies avoid embarrassing, blaming, or ascribing motives to the other person. Using these strategies when approaching conflict can help reduce defensiveness in the other person. Some good facework starters include 'You may not have meant it this way…' or 'You may not be aware of this, but…'.

Describe the conflict in terms of behaviour, consequences, and feelings
When you approach the other person, include the behaviour(s) involved in the conflict, the consequences of said behaviour, or how it makes you feel (or both).

- **Behaviour(s)**
  Tell the other person what the behaviour is and when it occurred. In other words, what did the person specifically do or say, and when did this occur? Be sure the behaviour description is specific, objective, and observable, with no meaning, interpretation, or significance attached. For example: "Your voice was raised last night when we were discussing finances …" versus "You were being a jerk last night." "You did not respond to my texts yesterday" versus "You are ignoring me." Starters include "I noticed recently that …"

- **Consequences**
  Describe why (s) you are bothered by the behaviour(s) or what happens in your life or someone else's life due to the behaviour you described. Starters: "This bothers me because …" "What happens when …"
- **Feelings**
  Describe the emotions you are experiencing due to the interpretation you attached to the behaviour. Be sure to say things like "I feel …" rather than "You make me feel …" or "You hurt my feelings." Starter: "I feel (emotion) …"

Use "I" statements
As mentioned in previous sections, "I" statements are essential in communication. (For example, "I interpret this behaviour x to mean …" versus "you are inconsiderate").

Be sure the other person understands your problem
Invite them to paraphrase and ask additional questions. Do not be offended or deterred if they have trouble understanding the problem, respond defensively or angrily, try to deflect responsibility, or need some time to respond. Remember, not everyone has learned practical communication skills, and needing time to process the information they receive should be expected.

Phrase your preferred solution in a way that focuses on common ground
Try to identify solutions that meet the goals/needs of both parties. This means utilizing the collaborative approach. Also, avoid framing your solution to make it seem like the only or even the best solution. Instead, solicit potential suggestions from the other.

Responding to Conflict

When another person approaches you about a conflict, consider the strategies below.

Listen to what the other has to say
If you are in a situation where another person approaches you with an issue, you can usually help de-escalate the situation by listening to what the other person says. Sometimes this can be hard, as our immediate reaction may be to deny or to

become defensive or emotional. However, try to listen objectively and demonstrate effective listening skills such as using back-channel cues, asking questions, and paraphrasing to show understanding. When you do this, you can gain more information and better understand the other's perspective and feelings, which will enable you to address the situation constructively.

Validate what the other person has to say

You do not need to agree, but you can show that you recognize and understand the other person's feelings and thoughts about the situation. Doing so can help neutralize tension and enable you to offer your own or a different perspective and work towards identifying solutions via the collaborative approach to conflict.

Take ownership and apologize if necessary

Sometimes conflict occurs because you have done something that has negatively impacted another person in some way, whether intentional or unintentional. When this happens, it is necessary to offer a sincere apology to alleviate hurt feelings or prevent the situation from escalating. In some situations, not apologizing, or apologizing ineffectively (e.g., "my bad"), can exacerbate the situation. Non-apologies or ineffective apologies can be problematic by escalating a simple mistake or misunderstanding into a full-scale conflict. They can result in long-term feelings of resentment or the issue being brought up later (often repeatedly).

Ask the other person for preferred solutions or engage in problem-solving to identify solutions

Ask for suggestions and work together to brainstorm solutions that might meet your needs. Be creative and think outside the box when possible. Evaluate proposed solutions and decide on the necessary actions needed to move forward. Be sure to reflect on how you will keep yourself and others accountable for implementing solutions.

Reflective Communication — Conflict Triggers

A key to handling conflict effectively is to notice patterns of conflict in specific relationships and to generally have an idea of what causes you and others to react

negatively. Four common triggers for conflict are criticism, demand, cumulative annoyance, and rejection (Christensen & Jacobson, 2000).

Criticism

You know from experience that **criticism**, or comments that evaluate another person's personality, behaviour, appearance, or life choices, may lead to conflict. Comments do not have to be meant as criticism to be perceived as such. If Gary comes home from college for the weekend and his mom says, "Looks like you put on a few pounds," she may view this as a statement of fact based on observation. However, Gary may take the comment personally and respond negatively to his mom, starting a conflict that will last for the rest of his visit. However, in many cases, you can consider alternative ways to phrase things that may be taken less personally, or you may determine that your comment does not need to be spoken at all. Most thoughts about another person's physical appearance, especially when negative, do not need to be verbalized. Ask yourself, "What is my motivation for making this comment?" and "Do I have anything to lose by not commenting?" If your underlying reasons seem valid, perhaps there is another way to phrase your observation. If Gary's mom is worried about his eating habits and health, she could wait until they are eating dinner and ask him how he likes the food choices at school and what he usually eats.

Demands

Demands also frequently trigger conflict, especially if the demand is viewed as unfair or irrelevant. It is important to note that demands are rephrased as questions may still be perceived as demands. The tone of voice and context are important factors here. As with criticism, thinking before you speak and before you respond can help manage demands and minimize conflict episodes. If you are demanding, include more information in the exchange to make your demand more precise or more reasonable to the other person. Consider making a request instead in a way that honours the other person's interpersonal and facial needs. If you are being demanded of, responding calmly and expressing your thoughts and feelings are likely more effective than withdrawing, which may escalate the conflict.

Cumulative Annoyance

Cumulative annoyance is a building of frustration or anger that occurs over time, eventually resulting in a conflict interaction. For example, your friend shows up late to drive you to class three times in a row. You did not say anything the previous times, but on the third time, you said, "You are late again! If you cannot arrive on time, I will find another way to get to class." Cumulative annoyance can build up like a pressure cooker, and as it builds up, the intensity of the conflict also builds. Criticism and demands can also play into cumulative annoyance. You likely have let critical or demanding comments slide, but if they continue, it becomes difficult to hold back, and most of us have a breaking point. The problem is that all the other incidents come back to your mind as you confront the other person, intensifying the conflict. You have likely been surprised when someone has blown up at you due to cumulative annoyance or when someone you have blown up at did not know there was a problem building. You are more likely to succeed with conflict management if you address the problematic behaviour without judgment. Remember to employ empathy and listening skills if you are the subject of someone else's built-up frustration.

Rejection

No one likes the feeling of rejection. **Rejection** can lead to conflict when one person's comments or behaviours are perceived as ignoring or invalidating the other person. Vulnerability is a component of any close relationship. When you care about someone, you verbally or nonverbally communicate. You may tell your best friend you miss them or plan a home-cooked meal for your partner working late. The vulnerability that underlies these actions comes from the possibility that our relational partner will not notice or appreciate them. When someone feels exposed or rejected, they often respond with anger to mask their hurt, which ignites a conflict. Concepts discussed throughout this book, such as empathy, perception checking, and listening skills can be helpful here.

Conflict Management Strategies

Many researchers have attempted to understand how humans handle conflict with one another. The first researchers to create a taxonomy for understanding conflict management strategies were Walton and McKersie (1965). They were primarily interested in how individuals handle conflict during labour negotiations. The Walton and McKersie model consisted of only two methods for managing conflict: integrative and distributive. An integrative conflict strategy is a win-win approach to conflict whereby both parties attempt to come to a settled agreement that is mutually beneficial. A distributive conflict approach is a win-lose approach whereby conflicting parties see their job as winning and ensuring the other person or group loses. Most professional schools teach that integrative negotiation tactics are generally the best ones. Over the years, several different conflict-handling patterns have arisen in the literature. Still, most of them agree with the first two proposed by Walton and McKersie, but they generally add a third dimension of conflict: avoidance.

The STLC Conflict Model

Cahn and Abigail (2014) created a straightforward conflict resolution model during the conflict. They called the STLC Conflict Model because it stands for stop, think, listen, and communicate.

Stop

The first thing an individual needs to do when interacting with another person during conflict is to take the time to be present within the conflict itself. Too often, people in a conflict say whatever enters their mind before they can process the message and think of the best strategies to send it. Others end up talking past one another during a conflict because they simply are not paying attention to each other and the competing needs within the conflict. Communication problems often occur during conflict because people tend to react to situations when they arise instead of being mindful and present during the conflict. For this reason, it is always important to take a breath during a conflict and first stop. Sometimes these

"timeouts" need to be physical. Maybe you need to leave the room and go for a brief walk to calm down, or maybe you just need to get a glass of water. Whatever you need to do, it is important to take this break. This break takes you from a "reactive stance into a proactive one" (Cahn & Abigail, 2014, p. 79).

Think

Once you have stopped, you can think about your communication. You want to think through the conflict itself. What is the conflict really about? Often people engage in conflicts about superficial items when there are genuinely much deeper issues that are being avoided. You also want to consider what causes led to the conflict and what possible courses of action can conclude the conflict. Cahn and Abigail (2104) argue that four possible outcomes can occur: do nothing, change yourself, change the other person, or change the situation.

First, you can simply sit back and avoid conflict. Maybe you are engaging in a political conflict with a family member, and this conflict will just make everyone mad. For this reason, you opt to stop the conflict and change the topic to avoid upsetting people. If you are asked at a work party what your impression is of our current premier, would you respond with, "Do you want me to answer that question?" You are aware that everyone else in the room would completely disagree with your opinion, so this is likely a can of worms that does not need to be opened.

Second, you can change yourself. Often, you are at fault and start conflicts. You may not realize how your behaviour caused the conflict until you step back and analyze what is happening. It is very important to admit that you have done wrong when it comes to being at fault. Nothing is worse (and can stoke a conflict more) than when someone refuses to see their part in the conflict.

Third, you can attempt to change the other person. Changing someone else is easier said than done. Just ask your parents/guardians! Our parents/guardians have attempted to change our behaviours at one point or another, and changing people is very hard. Even with the powers of punishment and reward, change often only lasts as long as the punishment or the reward. As long as people are punished, they will behave in a specific way. If the punishment is taken away, so is the behaviour. Lastly, you can just change the situation. Having a conflict with your roommates?

Move out. Having a conflict with your boss? Find a new job. Having a conflict with a professor? Drop the course. Admittedly, changing the situation is not necessarily the first choice people should make when thinking about possibilities, but often is the best decision for long-term happiness. In essence, some conflicts can not be settled between people. When these conflicts arise, you can try and change yourself, hope the other person will change (they probably will not), or just get out of it altogether.

Listen

The third step in the STLC model is listening. Humans are not always the best listeners. Listening is a skill, and unfortunately, this skill is desperately needed and often forgotten during a conflict situation. When you feel defensive during a conflict, listening becomes spotty because you focus on yourself and protecting yourself instead of trying to be empathic and seeing the conflict through the other person's eyes. One mistake some people make is to think they are listening, but in reality, they are listening for flaws in the other person's argument. You may use selective listening to devalue the other person's stance. In essence, you may hear one minor flaw with what the other person is saying and then use that flaw to demonstrate that everything else must also be wrong. The goal of listening must be to suspend judgment and attempt to be present enough to interpret the other person's message accurately. When you listen in this highly empathic way, you can often see things from the other person's point of view, which could help us come to a better-negotiated outcome in the long run.

Communicate

Last but certainly, not least, you communicate with the other person. Notice that Cahn and Abigail (2014) put communication as the last part of the STLC model because it is the hardest to do effectively during a conflict if the first three are not done correctly. When communicating during a conflict, you should be hyper-aware of your nonverbal behaviour (eye movement, gestures, posture, and so on). Nothing will kill a message faster than when accompanied by ineffective nonverbal behaviour. For example, rolling one's eyes while another person is speaking is not an effective way to engage in conflict resolution. It is important to be assertive and

stand up for your ideas during a conflict without becoming verbally aggressive. Conversely, you have to be open to someone else's use of assertiveness without tolerating verbal aggression. Mediators are often used to help call out people when they communicate in a verbally aggressive fashion. As Cahn and Abigail (2014) note, "People who are assertive with one another have the greatest chance of achieving mutual satisfaction and growth in their relationship" (p. 83).

As with all the aspects of communication competence discussed so far, you cannot expect that everyone you interact with will have the same knowledge of communication that you have after reading this book. But it often only takes one person with conflict management skills to make an interaction more effective. Remember that it is not the quantity of conflict that determines a relationship's success; it is how the conflict is managed. One person's competent response can de-escalate a conflict.

Key Takeaways

- Interpersonal conflict is an inevitable part of relationships that, although not always negative, can take an emotional toll on relational partners unless they develop skills and strategies for managing conflict.
- Perception plays an essential role in conflict management because you may be biased in determining the cause of your own and others' behaviours in a conflict situation. This necessitates engaging in communication to gain information and perspective.
- You can handle conflict better by identifying patterns and triggers such as demands, cumulative annoyance, and rejection and by learning to respond mindfully rather than reflexively.
- Conflict management strategies can be either integrative, distributive, or avoidance.
- The STLC model: Stop; Think; Listen and Communicate, can be used as an effective conflict resolution strategy.

Exercises

1. Which conflict triggers discussed (demands, cumulative annoyance, rejection, one-upping, and mindreading) do you find most often trigger an adverse reaction from you? What strategies can you use to manage the trigger better and more effectively manage conflict?

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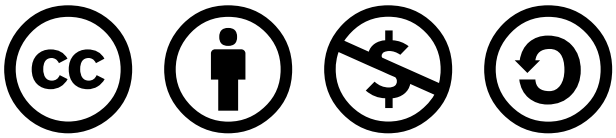
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CHAPTER 11: CULTURE AND COMMUNICATION

Humans have always been diverse in their cultural beliefs and practices. Still, as new technologies have led to the perception that our world has shrunk, and demographic and political changes have brought attention to cultural differences, people communicate across cultures more now than ever before. The oceans and continents that separate us can now be traversed instantly with an email, phone call, tweet, or status update. Additionally, our workplaces, schools, and neighbourhoods have become more integrated regarding race and gender, increasing our interaction with domestic diversity. This chapter explores intercultural competence, cultural safety and cultural humility, which are essential to your practice.

11.1 Intercultural Communication

Learning Objectives

- Define culture.
- Distinguish between surface and deep culture in the context of the iceberg model.
- Compare and contrast multicultural, cross-cultural and intercultural communication.
- Explain the effects of ethnocentrism.

You may be tempted to think of intercultural communication as interacting with people from different countries. While distinct national passports communicate a key part of our identity nonverbally, what happens when people from two different parts of the same country communicate? Indeed, intercultural communication happens between subgroups of the same country. Whether it is distinctions between dialects in the same language, differences in perspective between Eastern Canadians and Western Canadians, or the rural- versus-urban dynamic, our geographic, linguistic, educational, sociological, and psychological traits influence our communication.

Culture is part of the very fabric of our thought, and you cannot separate yourself from it, even as you leave home and begin to define yourself in new ways through work and achievements. Every healthcare environment has a culture; within what may be considered a global culture, there are many subcultures or co-cultures. For example, consider the difference between the occupational therapy and human resource departments in healthcare organizations. You may see two distinct groups with symbols, vocabulary, and values. Within each group, there may also be smaller groups, and each department member comes from a distinct background that influences behaviour and interaction.

Suppose you have a group of students who are all similar in age and educational level. Do gender and societal expectations of roles influence interaction? Of course! There will be differences on multiple levels.

More than just the clothes you wear, the movies you watch, or the video games you play, all representations of our environment are part of our culture. Culture also involves the psychological aspects and behaviours expected of our group members. From the choice of words (message), to how you communicate (in person or by email), to how you acknowledge understanding with a nod or a glance (nonverbal feedback), to internal and external interferences, all aspects of communication are influenced by culture.

Defining Culture

Culture consists of the shared beliefs, values, and assumptions of a group of people who learn from one another and teach others that their behaviours, attitudes, and perspectives are the correct ways to think, act, and feel.

It is helpful to think about culture in the following five ways:

- Culture is learned
- Culture is shared
- Culture is dynamic
- Culture is systemic
- Culture is symbolic

The iceberg is a commonly used metaphor to describe culture and is excellent for illustrating the tangible and the intangible. When discussing culture, most people focus on the “tip of the iceberg,” which is visible but makes up just 10 % of the object. The rest of the iceberg, 90 % of it, is below the waterline.

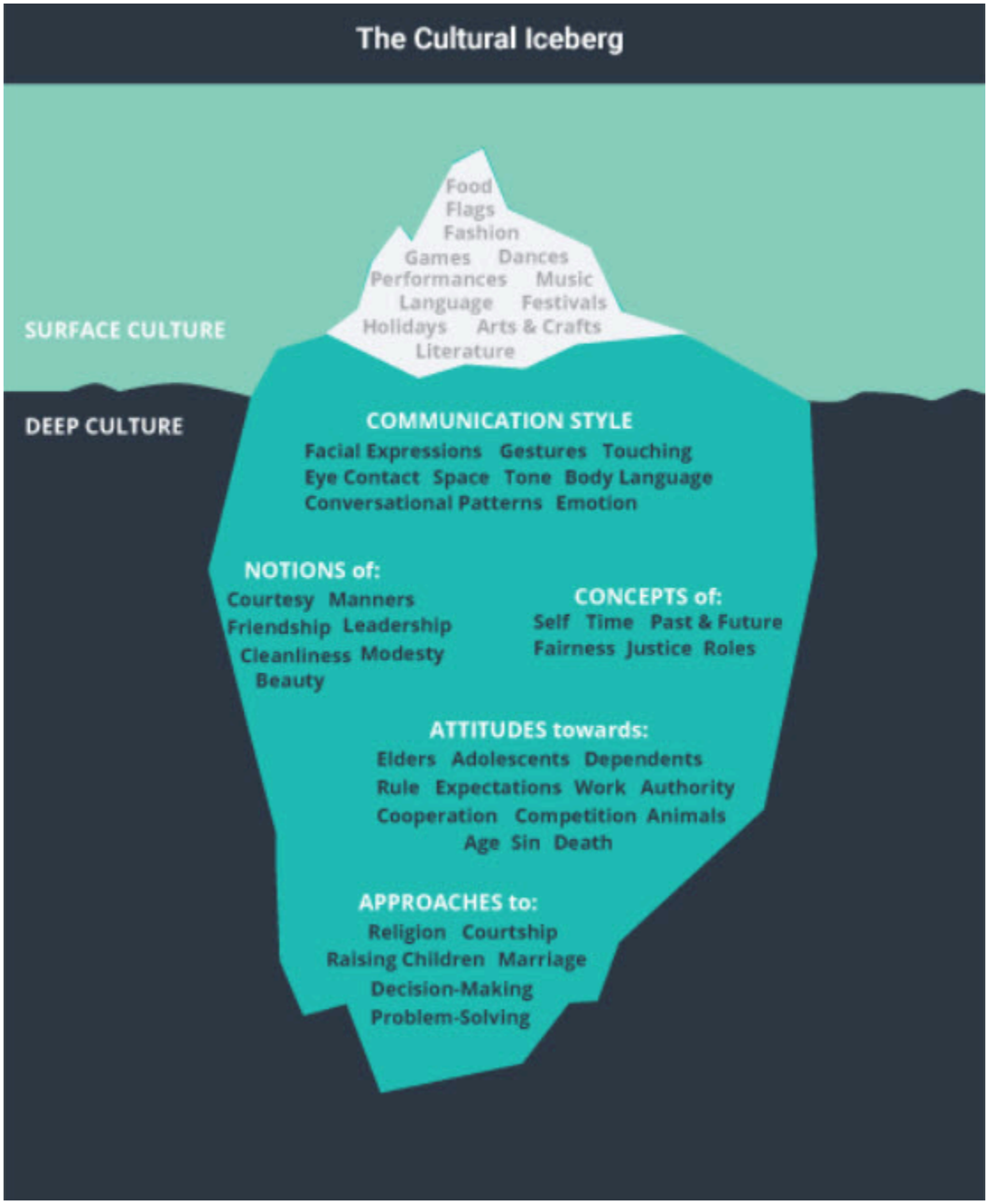


Figure 11.1.1. The cultural iceberg.

When addressing intercultural situations, many leaders pick up on the things they can see — things on the "tip of the iceberg." Such things as food, clothing, and language differences are easily and immediately apparent, but focusing only on these can mean missing or overlooking deeper cultural aspects, such as thought patterns, values, and beliefs that are under the surface. Solutions to any

interpersonal miscommunication that results become temporary bandages covering deeply rooted conflicts.

Cultural Membership

How do you become a member of a culture, and how do you know when you are a full member? So much communication relies on shared understanding, that is, shared meanings of words, symbols, gestures, and other communication elements. Communication comes easily when you have a shared understanding, but when you assign different meanings to these elements, you experience communication challenges.

What shared understandings do people from the same culture have? Researchers studying cultures worldwide have identified certain characteristics that define a culture. These characteristics are expressed in different ways, but they tend to be present in nearly all cultures:

- Rites of initiation
- Common history and traditions
- Values and principles
- Purpose and mission
- Symbols, boundaries, and status indicators
- Rituals
- Language

Multicultural, Cross-Cultural, and Intercultural Communication

Although they are often used interchangeably, it is essential to note the distinctions between multicultural, cross-cultural, and intercultural communication.

Multiculturalism is a surface approach to the coexistence and tolerance of different cultures. It takes the perspective of “us and the others.” It typically focuses on those tip-of-the-iceberg features of culture, thus highlighting and accepting some

differences but maintaining a “safe” distance. If you have a multicultural day at work, for example, it will usually feature food, dance, dress, or maybe learning how to say a few words or greetings in a sampling of cultures.

Cross-cultural approaches typically go a bit deeper, the goal being to be more diplomatic or sensitive. They account for some interaction and recognition of difference through trade and cooperation, which builds some limited understanding, such as, for instance, bowing instead of shaking hands or giving small but meaningful gifts. A common drawback of cross-cultural comparisons is crossing into stereotyping and ethnocentric attitudes — judging other cultures by our cultural standards — if you are not mindful.

Lastly, **intercultural approaches**, are well beneath the iceberg, intentionally making efforts to understand other cultures and ourselves better. An intercultural approach is not easy and often messy, but when you get it right, it is far more rewarding than the other two approaches. The intercultural approach is challenging and effective because it acknowledges the complexity and aims to work through it to a positive, inclusive, and equitable outcome.

Whenever you encounter someone, you notice similarities and differences. While both are important, it is often the differences that contribute to communication troubles. You do not see similarities and differences only on an individual level. You also place people into in-groups and out-groups based on our perceived similarities and differences. You tend to react to someone you perceive as an out-group member based on the characteristics you attach to the group rather than the individual (Allen, 2010). In these situations, it is more likely that stereotypes and prejudice will influence our communication. This division of people into opposing groups has been the source of great conflict around the world, and learning about difference and why it matters will help us be more competent communicators and help to prevent conflict.

Many misunderstandings can be avoided by remembering that in whatever context you find yourself, factors that may not be readily evident may be at play in your interactions with others. Using this empathetic understanding will allow you to seek a more profound understanding while developing a mindful approach or response. **Ethnocentrism** is the tendency to view other cultures as inferior to one’s own. Having pride in your culture can be healthy. Still, history has taught us that

having the predisposition to discount other cultures simply because they are different can be hurtful, damaging, and dangerous. Ethnocentrism, however, may make you far less likely to be able to bridge the gap with others and often increases intolerance of difference. The healthcare industry is no longer regional; in your career, you will cross borders, languages, and cultures. You will need tolerance, understanding, patience, and openness to difference. A skilled communicator knows that the learning process is never complete, and being open to new ideas is a crucial strategy for success.

Activity: Check Your Understanding



An interactive H5P element has been excluded from this version of the text. You can view it online here:
https://openbooks.macewan.ca/professionalcommunication/?p=2963#h5p-55

Key Takeaways

- Intercultural communication is an aspect of all communication interactions, and attention to your perspective is critical to effectiveness.
- Ethnocentrism is a significant obstacle to intercultural communication.

Exercises

1. Reflect on what to consider from the cultural iceberg essential to your professional practice.
2. List five words to describe a dominant culture. Then list five words to describe a culture with

which you are not a member, and have little to no contact or knowledge. Now compare and contrast the words, noting their inherent value statements.

Image Attributions

Figure 11.1.1. The cultural iceberg by Laura Underwood. Licensed under CC BY-SA 4.0.

Attribution Statement

Content adapted, with editorial changes, from:

Anonymous (n.d.). *Intercultural and International Group Communication*. Libre Texts. https://socialsci.libretexts.org/Bookshelves/Communication/Public_Speaking/An_Introduction_to_Group_Communication/05%3A_Intercultural_and_International_Group_Communication

Dingwall, J. R., Labrie, C., McLennon., & Underwood, L. (2021). *Cross-Cultural Communication*. Olds College/Libre Texts. https://socialsci.libretexts.org/Bookshelves/Communication/Introduction_to_Communication/Remix%3A_Professional_Communications_Foundations_(Dingwall_Labrie_McLennon_and_Underwood)/04%3A_Interpersonal/04.4%3A_Cross-Cultural_Communication

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11.2 Theories of Intercultural Communication

Learning Objectives

- Compare and contrast the work of three cross-cultural theorists.
- Explain the difference between low and high-context cultures.

Geert Hofstede and Fons Trompenaars are two theorists studying the differences between cultures. Common to these approaches is the prominence of context, leading to a view of human interactions as dynamic and changeable, given the complexity of language and culture, as human agents interact with their environments. Intercultural communication is often associated with professional areas such as business, education, healthcare, or hospitality services. These are all areas where communication with those representing different cultures and languages is crucial and encounters between those representing different cultures are increasingly the norm.

Hofstede

Social psychologist Geert Hofstede (Hofstede, 1982, 2001, 2005) is one of the most well-known researchers in cross-cultural communication and management. Hofstede's theory places cultural dimensions on a continuum that ranges from high to low and only makes sense when the elements are compared to another culture. Hofstede's dimensions include the following:

- **Power distance:** High power distance means a culture accepts and expects a great deal of hierarchy; low power distance means the opposite — the

president and the janitor could be on the same level.

- **Individualism:** High individualism means that culture tends to put individual needs ahead of group or collective needs.
- **Uncertainty avoidance:** High uncertainty avoidance means a culture tends to go to some lengths to be able to predict and control the future. Low uncertainty avoidance means the culture is more relaxed about the future, sometimes showing a willingness to take risks.
- **Masculinity**: High masculinity relates to a society valuing traits that were traditionally considered masculine, such as competition, aggressiveness, and achievement. A low masculinity score demonstrates traditionally considered feminine traits, such as cooperation, caring, and quality of life.
- **Long-term orientation**: High long-term orientation means a culture tends to take a long-term, sometimes multigenerational view when making decisions about the present and the future. Low long-term orientation is often demonstrated in cultures that want quick results and tend to spend instead of save.
- **Indulgence**: High indulgence means cultures that are okay with people indulging their desires and impulses. Low indulgence or restraint-based cultures value people who control or suppress desires and impulses.

These tools can provide excellent general insight into understanding differences and similarities across key below-the-surface cross-cultural elements. However, remember that people are still individuals who may or may not conform to the categories listed in Hofstede's dimensions.

Trompenaars

Fons Trompenaars is another researcher who developed a different set of cross-cultural measures. These are his seven dimensions of culture (Trompenaars, 2000.):

- **Universalism versus particularism**: the extent that a culture is more likely to apply rules and laws to ensure fairness in contrast to a culture that looks at the specifics of context and at who is involved to ensure fairness. The former puts the task first; the latter puts the relationship first.
- **Individualism versus communitarianism**: the extent that people prioritize

individual interests versus the community's interest.

- **Specific versus diffuse**: the extent that a culture prioritizes a head-down, task-focused approach to doing work versus an inclusive, overlapping relationship between life and work.
- **Neutral versus emotional**: the extent that a culture works to avoid showing emotion versus a culture that values a display or expression of emotions.
- **Achievement versus ascription**: the degree to which a culture values earned an achievement in what you do versus ascribed qualities related to who you are based on elements such as title, lineage, or position.
- **Sequential time versus synchronous time**: the degree to which a culture prefers doing things one at a time in an orderly fashion versus preferring a more flexible approach to time with the ability to do many things simultaneously.
- **Internal direction versus outer direction**: the degree to which culture members believe they have control over themselves and their environment versus being more conscious of how to conform to the external environment.

Like Hofstede's work, Trompenaars' (2000) dimensions help us understand some of those beneath-the-surface-of-the-iceberg elements of culture. It is equally important to understand our own cultures as it is to look at others, always being mindful that our cultures and others are made up of individuals.

Ting-Toomey

Stella Ting-Toomey's face negotiation theory builds on some of the cross-cultural concepts you have already learned, such as example, individual versus collective cultures. When discussing face negotiation theory, face means your identity, image, and how you look or come off to yourself and others (communicationtheory.org, n.d.). The theory says this concern for "face" is common across every culture, but various cultures—especially Eastern versus Western cultures—approach this concern differently. Individualist cultures, for example, tend to be more concerned with preserving their face, while collective cultures focus more on preserving others' faces. Loss of face leads to feelings of embarrassment or identity erosion, whereas gaining or maintaining face can mean improved status, relations, and general

positivity. Actions to preserve or reduce face are called facework. Power distance is another concept that is important to this theory. Most collective cultures tend to have more hierarchy or a higher power distance when compared to individualist cultures. This means that maintaining the face of others at a higher level than yours is an important part of life. This is contrasted with individualist cultures, where society expects you to express yourself, make your opinion known, and look out for number one. This distinction becomes important in interpersonal communication between people whose cultural backgrounds have different approaches to facework; it usually leads to conflict. Based on this dynamic, the following conflict styles typically occur:

- **Domination:** dominating or controlling the conflict (individualist approach)
- **Avoiding:** dodging the conflict altogether (collectivist approach)
- **Obliging:** yielding to the other person (collectivist approach)
- **Compromising**: a give-and-take negotiated approach to solving the conflict (individualist approach)
- **Integrating:** a collaborative negotiated approach to solving the conflict (individualist approach)

Another essential facet of this theory involves high-context versus low-context cultures. High-context cultures are replete with implied meanings beyond the words on the surface and even body language that may not be obvious to people unfamiliar with the context. Low-context cultures are typically more direct and tend to use words to attempt to convey precise meaning. For example, an agreement in a high-context culture might be verbal because the parties know each other's families, histories, and social positions. This knowledge is sufficient for the agreement to be enforced. No one has to say, "I know where you live. If you do not hold up your end of the bargain, …" because the shared understanding is implied and highly contextual. A low-context culture usually requires highly detailed, written agreements that both parties sign, sometimes mediated through specialists like lawyers, as a way to enforce the agreement. This is low context because the written agreement spells out all the details so that not much is left to the imagination or "context."

Key Takeaways

- Whether a culture values individualism or the collective community is a recurring dimension in many cross-cultural communication theories developed by Hofstede, Tromenaars and TIng-Toomey.

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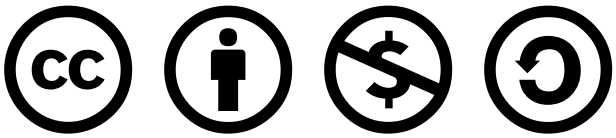
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Communication. Olds College/Libre Texts. https://socialsci.libretexts.org/Bookshelves/Communication/Introduction_to_Communication/Remix%3A_Professional_Communications_Foundations_(Dingwall_Labrie_McLennon_and_Underwood)/04%3A_Interpersonal/04.4%3A_Cross-Cultural_Communication

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11.3 Improving Intercultural Competence

Learning Objectives

1. Explore strategies to develop intercultural communication competence.
2. Describe the steps involved in the intercultural development continuum.
3. Analyze the differences between cultural safety and cultural humility.
4. Explain how cultural safety and humility can be demonstrated in your practice.

One helpful way to develop intercultural communication competence is to understand intercultural communication issues and best practices. From everything you have learned so far, it may feel complex and overwhelming. The intercultural development continuum is a theory created by Mitchell Hammer (2009) that helps demystify moving from monocultural to intercultural approaches. There are five steps in this transition:

1. **Denial**: Denial is the problem-denying stage. For example, a well-meaning person might say that they pay no attention to race issues because they are "colour blind" and treat everyone the same, irrespective of race. While this attitude seems fair-minded, it can mean willfully blinding oneself to genuine cultural differences. Little sensitivity or empathy can be present if one denies cultural differences exist. This is a monocultural mindset. When there is denial in organizations, diversity feels *ignored*.

2. **Polarization**: Polarization is the stage where one accepts and acknowledges that there is such a thing as cultural difference, but the difference is framed as a negative "us versus them" proposition. This usually means "we" are the good guys, and "they" are the bad guys. Sometimes a person will reverse this approach and say their own culture is wrong or otherwise deficient and see a different culture

as superior or very good. Either way, polarization reinforces already-existing biases and stereotypes and misses out on nuanced understanding and empathy. It is thus considered more of a monocultural mindset. When polarization exists in organizations, diversity usually feels *uncomfortable*.

3. **Minimization**: Minimization is a hybrid category that is neither monocultural nor intercultural. Minimization recognizes cultural differences, even significant ones, but tends to focus on universal commonalities that can mask or paper over other important cultural distinctions. This is typically characterized by limited cultural self-awareness in the case of a person belonging to a dominant culture or as a strategy by members of nondominant groups to "go along to get along" in an organization. When dominant culture minimization exists in organizations, diversity feels *not heard*.

4. **Acceptance**: Acceptance demonstrates a recognition and deeper appreciation of both one's own and other's cultural differences and commonalities and is the first dimension that exhibits a more intercultural mindset. People can better detect cultural patterns at this level and see how they make sense in their own and other cultural contexts. There is the capacity to accept others as being different and, simultaneously, fully human. When there is acceptance in organizations, diversity feels *understood*.

5. **Adaptation**: Adaptation is characterized by the ability to recognize different cultural patterns in oneself and other cultures and effectively adapt one's mindset or behaviour to suit the cultural context authentically. When there is an adaptation in organizations, diversity feels *valued and involved*.

The first two steps out of five reflect monocultural mindsets. According to Hammer (2009), people who belong to dominant cultural groups in a given society or people who have had very little exposure to other cultures may be more likely to have a worldview that is more monocultural. But how does this cause problems in interpersonal communication? For one thing, being blind to the cultural differences of the person you want to communicate with (denial) increases the likelihood that you will encode a message that they will not decode the way you anticipate or vice versa.

For example, culture A considers the head a special and sacred part of the body that others should never touch, certainly not strangers or mere acquaintances. But

in your culture, people sometimes pat each other on the head as a sign of respect and caring. So you pat your cultural A colleague on the head, which sets off a vast conflict.

It would take a great deal of careful communication to sort out such a misunderstanding. Still, if each party judges the other by their cultural standards, additional misunderstanding, conflict, and poor communication will likely transpire.

Using this example, polarization can come into play because now there is a basis of experience for the selective perception of the other culture. Culture A might say that your culture is disrespectful and lacks proper morals and values, and it might support these claims with anecdotal evidence of people from your culture patting one another on the sacred head!

Meanwhile, your culture will say that culture A is bad-tempered, unintelligent, and angry by nature and that there would be no point in trying to respect or explain things to them.

According to Hammer (2009), most people who have taken the Intercultural Development Inventory (IDI) inventory, a 50- question questionnaire to determine where they are on the monocultural–intercultural continuum, fall in the category of minimization, which is neither monocultural nor intercultural. It is the middle-of-the-road category that, on the one hand, recognizes cultural difference but, on the other hand, simultaneously downplays it. While not as extreme as the first two stages, interpersonal communication with someone of a different culture can also be difficult in this stage because the same encoding/decoding issues can lead to inaccurate perceptions. On the positive side, recognizing cultural differences provides a foundation for building and a point from which to move toward acceptance, which is an intercultural mindset.

Few people are in the acceptance category than the minimization category, and only a small percentage of people fall into the adaptation category. This means most of you will have your work cut out for you if you recognize the value — considering your increasingly global societies and economies — of developing an intercultural mindset to improve your interpersonal communication skills.

Cultural Safety and Humility

While **cultural competence** is a step toward effective intercultural communication, all healthcare professionals should embrace a cultural safety and humility framework that recognizes and strives to address power imbalances inherent in healthcare (First Nations, 2021). **Cultural safety** is an outcome of respectful engagement and is evident when people feel safe receiving care within any healthcare setting (First Nations, 2021, p. 5). **Cultural humility** is the process of self-reflection to understand one's personal biases and examine systemic biases that have impacted trust and therapeutic relationships. According to First Nations (2021), "Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience" (p. 7).

Communication is essential within your practice, and it is vital that, as health studies students, you understand your cultural identity and explore your values, attitudes, beliefs, and biases to provide culturally safe practice (Meadus, 2023). Despite the practice setting, students have the opportunity to communicate with culturally diverse clients. While it is not essential to know all cultures, you are expected to adopt a culturally sensitive approach to demonstrate respect, establish trust, and build therapeutic and meaningful relationships (Meadus, 2023).

Watch: Cultural Safety

As you watch the following video, think about how you can demonstrate cultural safety and humility in your professional practice area.



One or more interactive elements has been excluded from this version of the text. You can view them online here: https://openbooks.macewan.ca/professionalcommunication/?p=2972#oembed-1

Video Transcript (see Appendix B 11.3)

Key Takeaways

- When working with culturally diverse clients, it is essential to understand and adopt the principles of cultural competence, safety and humility (Meadus, 2023).
- Effective intercultural communication is essential in building respectful therapeutic communication interactions.

Exercises

Complete this Cultural Competence Module and reflect on the following:

1. What did you learn from the module?
2. How can you apply what you learned to your professional practice?

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Appendix A: Image Descriptions

Figure 1.2.2 image description: The transmission model of communication. Picture of two heads facing each other. The head on the left is the "Sender" and is encoding a message. The head on the right is the "Receiver" and is decoding. Between the two heads is a lightning bolt labelled Noise". An arrow labelled "Message Channel" points from the sender to the receiver. [Return to Figure 1.2.2]

Figure 1.2.3 image description: The interaction model of communication. Picture of two heads facing each other. The head on the left is the "Sender/Receiver" and is encoding a message. The head on the right is also the "Sender/Receiver" and is decoding. Between the two heads is a lightning bolt labelled Noise". An arrow labelled "Message-Feedback Channel" points from the sender to the receiver and from the receiver to the sender. [Return to Figure 1.2.3]

Figure 1.2.4 image description: The transaction model of communication. Picture of two heads facing each other labelled communicator. The head on the left is encoding a message. The head on the right is decoding the message. Between the two heads are several lightning bolts labelled Noise that could be due to Physical & Psychological Context, Social Context, Cultural Context, or Relational Context. A circle in the middle is labelled "Co-creation of meaning" and shows that the arrows go around the circle from sender to receiver and back again. [Return to Figure 1.2.4]

Figure 2.1.1 image description: Luft and Ingram's Dimensions of Self. The image is of a box dived into four squares. The left side of the box is labelled Others. The bottom of the box is labelled Me. The lower left square is labelled 1. Known to me and to others. The top left square is labelled 2. Known to others but not to me. The top right square is labelled 3. Not known to others or to me. The bottom right square is labelled 4. Known to me but not known to others. [Return to Figure 2.1.1]

Figure 3.1.1 image description: Arrows showing Most Abstract to least abstract moving downwards. The order is as follows;

- Wealth: Symbol that refers to prosperity, fortune, and success in relation to

material goods or other life conditions
• Asset: Symbol that recognizes the monetary worth of a possession
• Livestock: Symbol that recognizes animals kept on farms or ranches
. “Cow”: Symbol that recognizes other bovine creatures
. “Bessie”: Symbol assigned to “thing” allows us to communicate about it even when not in its presence
Most Concrete
• Direct experience with sensory information about “thing” that we will later call “Bessie”
[Return to Figure 3.1.1]

Figure 5.3.2 image description:

Silent Listening

Subheadings:
Questioning
example-Asking questions to understand the situation better.
Paraphrasing
example-Rephrasing in your own words what the speaker said.
Empathizing
example-Putting yourself in the same situation to understand what the speaker means.
Supporting
example-Showing that you endorse the speaker.
Analyzing
example-Considering possible solutions to what the speaker has said.
Evaluating
example-Assessing the best course of action.
Advising
example-Counselling, recommending, and offering information that will help the speaker.

[Return to Figure 5.3.2]

Figure 9.1.1 image description:

Image of the set of six competency domains that focus on the development and

integration of attitudes, behaviours, values, and judgments necessary for collaborative practice. These domains are: Role clarification, Team functioning, Interprofessional communication, Patient/client/family/community-centred care, Interprofessional conflict resolution, and Collaborative leadership

[Return to Figure 9.1.1]

Appendix B: Video Transcripts

NOTICE: Machine captions are not 100% accurate.

1.2 Transactional Communication

[00:00] This presentation will review transactional communication. This is one model of how communication occurs. Essentially what does it look like when we talk to one another if I was to try [00:10] to draw it out on paper what is the communication process look like and it doesn't matter whether you're talking to a friend one-on-one or you're giving a public speech. The drawing the [00:20] model is essentially the same. But first of all, what is communication in general? And my favorite definition of communication of every textbook probably has their own is from one of the [00:30] founding fathers of communication and he says, "Who, says what, to whom, and what channel, with what effect." And that's [00:40] essentially what happens who's talking to you how are they saying it and what actually happens what's the result or the outcome which is the whole purpose of communication we hope to affect other [00:50] people around us Howard Laswell as I said is one of the founding fathers of communication which communication is an interesting it's [01:00] really more of a recent academic field obviously it's been studied since the times of the Greeks and Romans but in colleges and universities modern day it really didn't come around till after World War Two a bunch of different [01:10] academic disciplines came together during World War two to help with creating enemy propaganda campaigns to get local Americans to do things like [01:20]starting Victory Gardens or recycling materials and all of these scholars as they came together and looked at ways of persuasion and they created a new [01:30] discipline in the process of it so that's where communications really started becoming more prominent in colleges and universities the model that Transaction Model [01:40] we're going to talk about today is just the transactional model there are several other action models linear models but we're not going to cover those I'm just going to stick to this one and the perspectives have changed [01:50] across time if you do look at them the action model is how they first drew communications

they had problems with it they moved on to another model finally [02:00] we have a transactional model let me talk about the pieces of the model first of all you have your source source is the sender they send the message now a [02:10] source has a job you as a speaker have a job encoding kneading into the message you ncod encoding meaning and basically what [02:20] that means is I have something I want to say and I want to say it just such a way that you understand it just how I want you to understand it but that is so much [02:30] easier said than done first of all we like to say in communications that perfect communication is never possible remember we're all unique individuals I have a different set of life experiences [02:40] than you do and for me to translate what's in my brain and imprint it on your brain just how it's online it's just not going to happen I can do a [02:50] pretty good job of it and I can communicate it as best as I can so that it's clear to you but nonetheless encoding is a difficult process and that's where you're really trying to [03:00] make things snap make things doesn't make your communications effective as possible the message is actually what you say and it may not be a verbal message it could also be a nonverbal [03:10] message in fact a large part of meaning of how we communicate is nonverbal versus reading channel is how I [03:20] communicate that message what medium do I use to communicate it is it a voicemail is it a text message on speaking to somebody face to face the [03:30] channel does affect how we understand the message if you've listened to a song on the radio versus listening to the song at the live concert you know that the live venue is a lot different than [03:40] it is on the radio let's say I'm walking down the hall one day and one of my co-workers says hey you're looking really nice today I would say thank you I think it was a nice compliment and [03:50] really not take too much of it but let's say the same person sent me a text message and said hey you look really nice today okay suddenly that compliment has gone from a nice compliment to kind of creepy so the [04:00] channel does make a difference in how we perceive the messages the receiver is the person receiving the message and okay remember the source had to encode [04:10] meaning into the message now the receiver has the job of decoding from the message so they have to figure out what they mean by that and a lot of what [04:20] we studying communications is the encoding and the decoding process finally we have noise and noise or all the different things that can possibly [04:30] get in way get in the way of that message being communicated as clearly as possible there's four basic types of noise I'd like to address first you have physiological noise maybe I have a [04:40] hearing problem I don't hear very well I have to use a hearing aid and I have difficulty hearing or maybe I have an

awful migraine headache I have just that [04:50] roaring in my head and my ears and it's totally getting in the way of me hearing so that would be physiological you can also have psychological noise and psychological noise would be oh say I [05:00] had a big fight with my boyfriend this morning really upset about it and I just can't concentrate in class because I'm too sad and upset about this fine I just [05:10] had that would be psychological noise you could have physical noise somebody's working on the roof there's a bulldozer outside your window you have static on [05:20] your cell phone there's physical little boys getting in the way of you hearing the message finally we have semantic noise sen and TI see semantic and [05:30] semantic noise are the words themselves maybe I'm using really hard to understand what's like semantic or maybe I'm let's say I'm given a lecture a [05:40] glass and one day I just start guessing the storm you would be like Lotus Davis and really just say that and it would probably interfere with what I said for [05:50] the next five minutes because you were still so shocked about me saying that that would also be semantic noise so those are the basic elements of the communication model now let me show you [06:00] an actual transactional model itself here's what it looks like now notice our source and our receiver on either end those are the same person [06:10] and the reason that is is because this is a synchronized process if I'm sitting there talking to you you're probably looking at me and nodding and [06:20] occasionally talking back to me but it's happening at the same time I'm talking to you so you're sending a [06:30] message back to me well I'm sending a message to you it's all going on at the same time feedback is normally the receiver sending sit back to the source but it's really [06:40] all the same thing so the message and the feedback are the source and receiver simultaneously communicating with one another we've got the channel down there [06:50] sometimes it's called code but the channel again the medium that that message is being communicated and one more thing has been added here up at the very top of that model context the [07:00] context is the greater situation in which this communication is taking place in as well as the relationship between the individuals I'm at work and on any [07:10] meeting with my boss we have a pretty good relationship but it's a maze of being meaning so I'm going to be serious and talk to them and be a professional [07:20] good professional employee then maybe afterwards I'm innocent in my boss's office and chitchat and could laugh about a few things and maybe talk about some things [07:30] in the meeting more candidly than I would have in the meeting itself and then maybe my boss and I go out for drinks on a Friday night after work and it's a whole different setting

and it's [07:40] a whole different kind of conversation that's going to take place at the happy hour than in the business meeting so the same person depending on the context can [07:50] have different things or let's say I had a fight with my boss I was really upset about a decision they made and I don't like it and so there's kind of this tense air over the relationship that's [08:00] also part of the context and that's certainly going to affect my next interaction with that person it might get smoothed over eventually but at least temporarily that's part of the context so context is the location [08:10] as well as the relationship between the people involved you've still also got the noise getting in the way all throughout this whole communication process so this is the [08:20] should have had this up there this is the transactional communication process and the main things I want you to know about this are that first of all that message and feedback is going on at the [08:30] same time it's all one in the same the source and the receiver the same person and communication again is really dynamic it is not just a sequential [08:40] process but it's all going on at the same time so I hope this has been helpful in helping you understand the transactional communication process thank you very much.

[Return to Video 1.2]

1.4 How Effective Communication Can Save Lives in the Healthcare Setting

Introduction [00:02] How effective communication can save [00:04] lives in the healthcare settings [00:07] illness acute or chronic or injuries [00:11] can interrupt life dramatically the rise [00:14] and fall of emotions in action to an [00:16] illness injury or surgery can create [00:20] instability [00:21] numbness and a sense of hopelessness [00:24] for example a cancer diagnosis can take [00:27] a person through dozens of emotions in a [00:29] single [00:30] minute fear of the unknown loss of [00:33] control [00:33] confusion grief anger depression [00:37] and anxiety can hit hard who will be [00:40] there to help this person during this [00:42] surreal and scary time [00:44] the healthcare professional hence as a [00:47] healthcare professional [00:49] your communication skills need to be [00:51] stellar and a top [00:52] priority good communication skills are [00:55] required by all health care [00:57] professionals [00:58] not just by the social workers and [01:00] psychologists [01:02] active listening responding [01:04] appropriately to patients needs and

[01:06]] concerns [01:07] properly assessing body language and [01:09] possessing a non-judgmental attitude [01:12] are all necessary skills that healthcare [01:14] workers need to possess [01:16] the importance of communication in the [01:19] healthcare industry can help [01:20] prevent injuries and death increase [01:23] trust between the patient and the [01:24] caregiver [01:25] and strengthen relationships with other [01:27] staff members [01:29] this video will discuss how [01:30] communication can save lives in health [01:33] care and [01:33] increase success on the job when working Importance of Communication [01:37] with patients and family members [01:40] as a health care professional it is [01:42] important to put your work self aside [01:45] and remember you are working with a real [01:47] person going through real [01:49] challenges rapport and trust can be [01:52] built if you show empathy [01:54] compassion and understanding with a [01:56] non-judgmental approach [01:58] this will help minimize or avoid [02:00] altogether [02:01] miscommunication mistrust and [02:04] unnecessary injuries and help you [02:06] determine what needs the patient [02:08] has family members also need the same [02:11] approach [02:12] simple communication is very important [02:15] leave out the shop talk unless [02:18] absolutely necessary [02:19] and then be prepared to explain any [02:21] terms or procedures that may be [02:23] difficult to understand without talking [02:26] down to the patient [02:27] and family members take it slow and have [02:30] patience [02:32] imagine yourself or your loved one going [02:34] through the same thing [02:36] this will increase your empathy greatly [02:39] at the opposite end of the spectrum do [02:41] not leave the patient [02:42] or family members in the dark about the [02:44] situation [02:46] this can cause anxiety to skyrocket and [02:49] tempers to flare [02:51] best practices to implement Plan for Different Personality [02:54] 1. plan for different personalities [02:58] we are all unique and so are your [03:00] patients [03:02] you will come in contact with a wide [03:03] array of personalities in your health [03:05] care career [03:07] the pleasant people are the easiest to [03:09] deal with [03:10] it is the more difficult personalities [03:13] that will test your patients [03:15] be careful not to react or respond [03:17] harshly [03:18] they still need empathy understanding [03:21] and [03:21] care even if they don't act like they do [03:24] or aren't responding positively to your [03:26] attempts [03:27] your kindness may be the brightest spot [03:30] in their day 2. Be Empathetic [03:32] be empathetic empathy requires [03:35] sincerity it requires connection with [03:39] your patients [03:40] it also requires facial expressions that [03:43] show concern [03:44] soothing kindness and patience [03:48] your patients will see through fake [03:50] gestures and will know when you are not [03:52]

extending through care [03:54] empathy is the ability to walk in your [03:56] patients shoes and show that you do not [03:58] judge them [03:58] and are willing to go deeper 3. Active Listening Skills [04:02] use active listening skills [04:05] active listening requires that you not [04:07] only use your ears [04:09] but the ears of your heart and mind when [04:12] you listen actively [04:13] you can tune into patient needs and cues [04:16] words [04:17] and emotions that indicate distress [04:19] depression [04:20] and other highly charged emotions listen [04:24] more talk less ask open-ended questions [04:28] and be careful not to interrupt your [04:30] patience [04:31] and watch your body language be sure [04:34] your body stance is not guarded [04:36] defensive or uninterested. Take Notes [04:39] 4. take notes [04:42] there is nothing worse than forgetting [04:44] important information because it was not [04:46] written down [04:48] this can be detrimental in a healthcare [04:50] setting [04:51] take clear and concise notes if using a [04:55] computerized system [04:57] remember that everyone involved will be [04:59] reading your notes [05:00] so use it as a place to communicate with [05:02] others and keep them apprised of [05:04] individual situations [05:07] detailed notes about medication symptoms [05:10] procedures dietary needs and [05:13] psychosocial needs are vital in [05:15] healthcare [05:16] do not trust your memory even if it is [05:19] sharp Be Direct [05:20] 5. be direct clear and open [05:25] be open direct and candid about all [05:28] things involving your patients [05:30] their family members and caregivers [05:33] seal up any cracks in communication and [05:35] do not leave anything to chance or [05:37] guesswork [05:39] transparency should be a focus of [05:41] communication models among employees and [05:43] in employee-patient relationships [05:47] healthy and strong communication in the [05:49] healthcare industry is key to the [05:51] successful [05:52] running of daily operations no matter [05:54] what role you play [05:56] every person is important in the [05:58] healthcare field and every person is [06:00] responsible for possessing strong [06:02] communication skills [06:04] open and direct communication can save [06:07] the day or a life [06:10] for more videos like this subscribe to [06:12] our YouTube channel [06:14] talent and skills hub enabling [06:16] environment for actualization of [06:18] passions and ambitions [06:20] also remember to share this video with [06:22] others to help them [06:23] learn how effective communication can [06:26] save lives in the healthcare settings.

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2.2 Perceiving is Believing: Crash Course Psychology #7

[00:00] Every rose has its thorn. Only the good die young. Slow and steady wins the race. [00:05] And what you see is what you get. Except that in [00:08] reality, several varieties of roses do not have thorns; [00:12] both the good and the bad, on occasion, tragically die young; fast and steady beats slow and steady [00:17] every time; and what you see is, well... Our perception, or how we order the cacophonous [00:24] chaos of our environment, is heavily influenced, biased even, by our expectations, experiences, [00:31] moods, and even cultural norms. And we can be pretty good at fooling ourselves. In the last two [00:36] lessons, we've learned how we see shapes and colors, hear sounds, and smell and taste the [00:42] world's chemical concoctions, but our senses [00:44] mean little without our brain's ability to organize [00:47] and translate that data into meaningful perceptions. [00:51] Without perception, your mother's face is just a [00:53] combination of shapes. Without the ability to interpret scent, we couldn't differentiate the [00:58] smell of toast from a grease fire. Our perception is the process that allows us to make meaning [01:03] out of our senses and experience the world around us. it's what makes life understandable, Perception: Your Mind's Eye [01:08] but also it means that sometimes what you see is not actually what you get. [01:12] [INTRO MUSIC] [01:22] So that was awesome, right? Upside-down, I look like me. Right-side-up, I look like some [01:27] kind of terrifying monster. Your brain isn't used to upside-down faces, so it's basically [01:31] just doing its best to put the pieces together. But it knows exactly what a right-side-up face [01:35] should look like, and that is not it. Just one of thousands of examples proving that your brain [01:41] does all the work of perception, and your eyes really are just feeding raw data. It's important [01:47] data, but it isn't actually what we see. What we see is the realm of the mind, not the eye. Perceptual Set [01:53] What kind of bird do you see right now? A duck, right? But if I said, "What kind of mammal do you [01:58] see?" a bunny probably would have popped out at you. Now, you should be seeing both of them [02:02] popping back and forth, but likely your brain wants to perceive the image related to [02:06] whichever cue you first heard, or whichever image is more familiar to you. By cueing [02:11] "mammal" or "bird," I influenced your expectations and you saw what I wanted you to see. Pretty cool! [02:18] Your expectations are just one factor in your perceptual set: the psychological factors that [02:23] determine how you perceive your environment. Sometimes, seeing is believing, but perceptual [02:28]

set theory teaches us that believing is also seeing. Context is another factor in your [02:32] perceptual set. If the duck bunny thing was pictured with Easter eggs all around it, [02:36] you'd think bunny right away — which is kind of weird, considering that of ducks [02:40] and bunnies, one is actually much more likely to be near an egg (it's not the bunny). [02:45] And that's an example of how culture is also an important part of our perceptual set. [02:49] As much as our perceptions are affected by context and expectations, they're also [02:53] swayed by our emotions and motivations. People will say a hill is more steep if they're [02:58] listening to emo by themselves than if they're listening to power pop and walking with a friend. [03:02] Most of the time, your personal perceptual set leads you to reasonable conclusions, but sets [03:07] can also be misleading or even harmful. They're [03:10] the basis of tons of entertaining optical illusions. [03:12] These two tables, for example, are the same size, Optical Illusions [03:15] but the positions of their legs make that impossible [03:18] for you to believe until I lay them over each other. [03:20] And while all the fooling of our visual perception [03:22] can be fun, it also helps us understand how it works. [03:25] Our minds are given a tremendous amount of [03:28] information, especially through the eyes, and we need [03:31] to make quick work of it. Turning marks on a paper [03:34] into words; blobby lumps into the face of a friend; [03:37] seeing depth, color, movement, and contrast; [03:40] being able to pick out an object from all the other [03:42] clutter around it seems so simple, but we've come Form Perception & Figure-Ground Relationships [03:45] to discover that it is quite complicated. So complicated [03:48] that we have a name for it: form perception. Take a neat [03:51] little dynamic called the "figure-ground relationship." [03:53] It's how we organize and simplify whatever scene [03:56] we're looking at into the main objects or figures and the surroundings or ground that they stand [04:01] out against. The classic "faces or vases" illusion is an example. Is it two faces against a white [04:06] background, or a vase against a black background? [04:08] If you look long enough, you'll see that the relationship [04:10] between the object and its surroundings flip back and forth, continually reversing, sometimes white [04:15] is the figure and black is the ground. That figure-ground [04:18] dynamic, though, is always there. The concept applies [04:21] to non-visual fields as well. Say you're at a party, [04:24] holding up the wall and creeping on your crush [04:26] across the room, trying to casually listen in on what [04:28] they're saying. As the focus of your attention, that voice [04:31] becomes the figure, while all the other voices jabbering [04:34] about sports and beer pong and Sherlock and everything [04:36] that doesn't have to do with that one beautiful person [04:39]

all becomes the ground. Now that your mind has [04:41] distinguished figure from ground, it has to perceive [04:43] that form as something meaningful. Like for one, [04:46] that large shape on the couch is a person, and [04:48] further, that person isn't just any person, but the [04:51] specific unique person of your dreams. One way our minds shuffle all of these stimuli into Rules of Grouping: Proximity, Continuity, & Closure [04:55] something coherent is by following rules of grouping, [04:58] like organizing things by proximity, continuity, or closure. [05:01] The rule of proximity, for instance, simply states that [05:03] we like to group nearby figures together. So instead of [05:06] seeing a random garble of partygoers, we tend to [05:09] mentally connect people standing next to each other. [05:11] Like, there's the hockey team over there, and the debate team over there, and then you've got the [05:14] band geeks — why are all these people at the same party? We're also drawn to organize our world with [05:18] attention to continuity, perceiving smooth, continuous [05:22] patterns, and often ignoring broken ones. We also like [05:25] closure — and not just after a breakup. Visually, we want [05:28] to fill in gaps to create whole objects. So here, we see [05:32] an illusory triangle breaking the completion of these [05:34] circles on the left. But just add the little lines, close up [05:38]] the circles, and you stop seeing the triangle. Form Depth Perception [05:40] Perception is obviously crucial to making sense [05:42] of the world, or, y'know, a moderately interesting party. [05:45] But imagine trying to navigate the world without [05:48] depth perception. As you gaze upon your one true love, [05:50] the image hits your retina in two dimensions. Yet somehow, [05:54] you're still able to see the full three-dimensional [05:57] gloriousness of their form. You can thank your [06:00] depth perception for that! Depth perception is what helps us estimate an object's distance [06:04] and full shape. In this case, a nice shape that is [06:07] currently too far away from you. It is at least partially [06:09] innate — even most babies have it. We're able to perceive Binocular vs. Monocular Visual Cues [06:12] depth by using both binocular and monocular visual cues. [06:16] Binocular cues, as the name gives away, require the use [06:19] of both eyes. Because your eyes are about 2.5 inches apart, [06:22] your retinas receive ever-so-slightly different images. [06:25] You know, camera one, camera two. So when you're [06:27] looking with both your eyes, your brain compares the two images to help judge distance. The closer [06:31] the object, the greater the difference between the two images, also known as the retinal disparity. [06:36] Retinal disparity is pretty easy to see, you just hold [06:39] your fingers up, and then you look past them, and [06:41] suddenly you have four instead of two fingers. Because those left and right images vary only

[06:45] slightly, retinal disparity doesn't help much when it comes to judging far-off distances. [06:50] For that, we look to monocular cues to help us determine the scale and distance of an object. [06:55] These are things like relative size and height, linear [06:58] perspective, texture gradient, and position. [07:01] Relative size allows you to determine that your crush is not supporting a tiny newborn chihuahua [07:05] on their shoulder, but rather, there's a full-grown [07:08] chihuahua behind them in the back of the room. [07:10] In the absence of a chihuahua (or like object), you [07:12] can also judge stances using your linear perspective. [07:15] If you've ever made a perspective drawing in art class, [07:17] you'll remember that parallel lines appear to meet [07:19] as they move into the distance. Just like the tiled floor, [07:22] the sharper the angle of convergence, and the closer [07:24] the lines together, the greater the distance will seem. [07:27] And if you've ever looked out at a mountain range [07:29] or a Bob Ross painting, you'll understand texture gradient as the cue that makes the first ridge [07:33] appear all rocky and textured, but as your eye follows the ridges into the distance, they become [07:38] less detailed. And finally, our interposition, or overlap, [07:41] cue tells us when one object, like this oaf here,[07:44] blocks our view of something else, your crush, we perceive it as being closer. And in this case, [07:49] especially annoying. So all these perceptual concepts can be demonstrated with a fixed Motion Perception [07:53] image, but of course, life involves a lot of movement. At least if you're doing it right. [07:57] We use motion perception to infer speed and direction of a moving object. [08:00] Like, your brain gauges motion based partly on the idea that shrinking objects are [08:04] retreating and enlarging objects are approaching. The thing is, your brain [08:08] is easily tricked when it comes to motion. For instance, large objects appear to move [08:12] much more slowly than small ones going the same speed. And in addition to organizing Perceptual Constancy [08:16] things by form, depth, and motion, our perception of the world also requires consistency. Or as [08:21] psychologists call it, constancy. Perceptual constancy is what allows us to continue [08:25] to recognize an object, regardless of its distance, viewing angle, motion, or illumination, [08:31] even as it might appear to change color, size, shape, and brightness, depending on the [08:35] conditions. Like, we know what a chihuahua looks like, whether it looks like this, [08:39] this, or this. In the end, though, your perception [08:41] isn't just about funky optical illusions. It's about [08:43] how you understand the world and your place in it, both physically and psychologically. [08:48] Your sensory organs pull in the world's raw data, [08:51] which is disassembled into little bits of information [08:54] and then reassembled in your brain to form your own model of the world. It's

like your senses [08:59] are just collecting a bunch of Legos and your brain [09:02] can build and rebuild whatever it perceives. [09:05] A party, your crush, a duck, or a chihuahua. In other words, your brain constructs [09:11] your perceptions. And if you were correctly constructing your perceptions this lesson, Review & Credits [09:14] you learned what forms your perceptual set, how form perception works, and the many [09:18] visual cues that influence your depth perception. Thank you for watching, especially to all of our [09:23] Subbable subscribers who make this whole channel possible. If you'd like to sponsor an [09:27] episode of Crash Course Psychology, get a copy of one of our Rorschach prints, and even be [09:32] animated into an upcoming episode, just go subbable.com/crashcourse. This episode [09:36] was written by Kathleen Yale, edited by Blake de Stino [09:38] and myself, and our consultant is Dr. Ranjit Bhagwat. [09:41] Our director and editor is Nicholas Jenkins, the script supervisor is Michael Aranda who is [09:46] also our sound designer, and the graphics team is Thought Café.

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2.3.1 The Halo Effect

[00:03] The impression you create is affected by [00:06] the way you look. We tend to think [00:09] beautiful people are more intelligent, [00:11] popular, confident and better at [00:14] everything from their jobs to flying a [00:16] plane. And if you can create a favorable [00:20] impression, you can create advantages for [00:23] yourself. You're more likely to get what [00:26] you want. It might be a job. It might be [00:29] popularity or it might be the control [00:33] you have over the people around you. Meet [00:38] Ruth and Rebecca. [00:40] Rebecca's classically attractive. Ruth's [00:43] more on the plain side. [00:50] They're going to demonstrate that how [00:52] you look affects how you're treated. [00:54] They're going to struggle up staircases [00:56] at opposite ends of Liverpool Street [00:58] Station in London with heavy bags and [01:01] we'll be filming in this workmen's hut. [01:05] First up, Ruth. How long before a knight [01:09] in shining armor rescues this damsel in [01:11] distress? [01:38] Ruth: "Oh, that's so kind of you." Helped at last [01:45] but by two women and it took 45 seconds. [01:50] Now Rebecca's turn. How long before she's [01:54] rescued? [01:57] Male bystander: "You want a hand with your bags, love?" Rebecca: "Would you mind?" Male bystander: "No, not at all." Rebecca:

“Just shattered. I’m [02:01] just trying to get the top of those [02:02] stairs there. [02:04] Can you do the other one at the same [02:05] time?” All of eight seconds. [02:11] Ruth is occasionally saved but it [02:13] takes longer. On average 70 seconds. [02:16] Rebecca’s average: 24 seconds. Rebecca: “Just start [02:20] by these phones here. Great, [02:22] thanks!” You’d be forgiven for thinking [02:24] that this caveman behavior is more about [02:27] sex than chivalry. [02:28] Male bystander: “Yeah, pretty girl needing bags carrying [02:31] upstairs. I’m a sucker for that sort of thing. [02:33] Every time. From my grandfather. [02:35] He’s a charmer too.” But there’s more to it [02:38] than that. We have a tendency to think [02:40] highly of beautiful people. They are very [02:43] very delicate. sorry Hamilton family [02:46] heirloom switchy belief bringing them [02:48] back for my mum and we want to be near [02:51] them as if some of their glory will [02:54] reflect on to us um have you got a few [02:57] minutes is bad cuz it didn’t turn out [02:59] but I’d need to get them into a taxi [03:01] where I’m gonna be really rude now and [03:04] ask one more favor could you could you [03:07] lend me some money [03:08] how much you know can you do that on [03:11] three the men are mesmerised they do [03:14] anything Rebecca [03:17] although they clearly go out of their [03:19] way for a pretty girl you’re a true [03:21] gentleman I really appreciate it they [03:24] deny that looks have anything to do with [03:26] pain I’m really thirsty and I won’t mind [03:28] getting a drink – fine – wait that’s [03:30] what I got me at the moment you’re more [03:31] than welcome sir [03:32] if somebody needed help I’d like to [03:34] think that I words help [03:36] everybody across the range regardless if [03:38] they’re good-looking attractive smelly [03:40] well presented or whatever an American [03:42] study found business graduates earn six [03:44] hundred dollars a year more for every [03:46] extra inch of height and in U.S. [03:49] presidential elections the taller man [03:51] has won 17 out of 21 times [03:56] so to test whether size really does [03:59] matter we took two actors to the streets [04:01] of New York Marcus and Melvin earth [04:03] almost identical same age similar looks [04:06] just one obvious difference [04:09] Marcus is six foot four and Melvin’s [04:11] five foot two [04:14] but who looks more successful at work [04:18] first tall man Marcus he’s lawyer doctor [04:23] and then account it I would say he’s an [04:26] executive who likes sports [04:28] Carly earns about it was about half a [04:30] million a year 5 clover close to [04:33] sixty a year six thousand I would say [04:36] maybe a hundred hundred thousand a year [04:38] looks like a tycoon now short man Melvin [04:44] maybe a cook like a cook I think it’s a [04:49] quiet guy and he’s not very happy I [04:52] think he’s having difficult situation [04:54] right now [04:55] say ends well average income

nothing [04:57] fancy but enough live on here minimum [05:01] wage I guess um 20,000 a year on average [05:06] they credited Melvin with Omega $20,000 [05:09] income and Marcus with a whopping two [05:12] hundred and twenty thousand dollars all [05:15] thanks to a difference of 14 inches I [05:17] wish I was his I stay true.

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2.3.2 The Halo Effect, Reverse Halo Effect and Horn Effect Defined and Explained (w/Examples) in One Minute

Intro [00:00] Have you ever wondered why attractive [00:01] people who look happy appear so [00:03] frequently in commercials? [00:04] Well back in 1920 psychologist Edward [00:07] Thorndike coined a term for it, The Halo [00:09] Effect. He noticed that if people have The Halo Effect, [00:11] certain traits that we rate highly such [00:13] as attractiveness, we tend to perceive [00:15] them as also being competent, successful, [00:17] and so on. [00:17] In other words, the halo effect is the [00:19] judgment error or a cognitive bias which [00:21] revolves around us starting with [00:23] accurate information. For example, [00:24] noticing that someone is attractive and [00:26] based on that information we wrongfully [00:29] assume other positive things are also [00:30] true despite not having evidence to that [00:33] effect. However, things can get tricky for Reverse Halo Effect. [00:35] Example: Marshall Dermer and Barrow [00:37] noticed back in 1975 that being [00:40] attractive can backfire on you because [00:42] jealousy can make those less attractive [00:44] than you right you lower than you [00:45] deserve you can think of this as the [00:48] reverse halo effect finally we also have [00:50] the so-called horn effect and the name [00:52] speaks for itself in that you notice or [00:55] know something negative about someone [00:56] and find it very difficult to appreciate [00:59] or quantify the good things that person [01:01] does. For example, knowing that someone [01:03] used to be a criminal and finding it [01:05] difficult to believe he or she changed [01:06] even if that is the case.

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2.4 How to Perception Check

Intro [00:02] [Music] [00:06] This one time me and my girlfriend were [00:07] eating lunch [00:08] when I matter-of-factly said, “I think [00:11] pickles are gross.” [00:13] She looked at me with this intense look [00:14] of disappointment and said, [00:16] “You have never been more wrong about [00:18] anything.” And I said, [00:20] “No, pickles are gross. They’re slimy. [00:22] They’re a mixture of the two worst [00:24] tastes, sourness and vinegar, and they’re [00:27] basically [00:28] just a cucumber’s smelly cousin.” And then [00:30] my girlfriend had this look of shock and [00:32] said, [00:33] “I gotta go so.” She stomps out of the room [00:36] and slams the door. [00:38] Now I’m sitting there thinking oh my [00:40] gosh did I [00:41] actually just start a fight over my [00:43] opinion on pickles? [00:45] Why is she angry at me for not liking [00:47] the same food she likes? [00:49] That’s so immature. I mean, if it’s really [00:52] that big of an issue you can just tell [00:54] me. [00:54] You don’t need to go and abandon ship. So [00:57] I sit there [00:58] and I start to get angry. Why won’t she [01:01] talk to me about this? This is insane. [01:04] Maybe she doesn’t care enough about me [01:05] to argue. Maybe this is just an [01:07] indication [01:08] of a way way bigger problem and then I [01:11] realized [01:12] this would be the perfect time to bust [01:14] out one of the most powerful tools [01:16] in the emotional intelligence toolbox: [01:19] perception checking. [01:21] My name is Damian Barton and today we’re [01:24] going to talk about perception checking [01:26] so we can figure out how to address [01:28] behavior that bothered us [01:29] without making the other person feel [01:31] attacked. [01:32] Let’s get into it. We constantly tell [01:36] ourselves a story [01:37] about why someone is acting the way they [01:39] are in psychology. We call those [01:41] explanations [01:42] attributions. We attribute behavior with [01:46] specific motivations. [01:48] That guy cut me off in traffic because [01:49] he’s a jerk. My mom calls me so often [01:52] cause she loves me. My girlfriend sent a [01:54] short text saying goodnight [01:56] instead of a long text so she must be [01:58] angry with me. [01:59] When we make these attributions, we’re [02:02] making assumptions about other people’s [02:04] behavior. [02:05] The problem with making assumptions [02:07] about why someone did something [02:09] is that we’re often wrong. We aren’t in [02:12] their head. [02:12] We don’t actually know what they’re [02:14] thinking. We can make guesses [02:16] but we don’t know for sure so [02:19] problems pop up when we tell ourselves a [02:22] story about why [02:23] someone just behaved the way they did.

We [02:26] can get sent down this wild goose chase [02:28] for a goose that doesn't exist. [02:30] We tell ourselves a whole story that [02:33] isn't true. [02:34] We can get hung up on a problem that [02:36] just isn't there. Making assumptions [02:38] can lead to fights that never needed to [02:41] happen. [02:42] I don't know if my girlfriend was [02:43] actually angry about me insulting [02:45] pickles [02:46] or if she was just late for something [02:48] and she forgot to tell me about it. [02:50] So if she gets home and I say, "What is [02:52] your problem? [02:53] Why did you just stomp out of here?", and [02:55] slam the door. [02:57] She might actually become angry or [02:59] defensive just because of the accusatory [03:02] tone [03:02] I'm using when I'm asking the question [03:05] and that [03:05] could lead to a whole new fight because [03:08] she feels like I'm being disrespectful. [03:10] So when we ask about why someone did the [03:13] thing they did [03:14] we don't want to attack them. We want to [03:16] get the actual answer [03:18] of what's going on through their head. So [03:21] how do we [03:22] effectively do this? It's time for the [03:28] take away Perception Check. [03:33] We're going to use a three-step process [03:35] called [03:36] perception checking. Now the goal of this [03:38] is to understand [03:39] why someone did something without [03:41] triggering a defensive response [03:44] so the first thing we're going to do is [03:46] describe their behavior [03:48] in neutral language. I noticed that you [03:52] blank. [03:53] I noticed that you ran out of here in a [03:55] hurry. You see I'm not [03:56] applying a positive or negative spin to [03:59] their behavior. [04:00] I'm just stating exactly what they did [04:03] in as neutral of a tone as possible. [04:06] Then we provide two possible [04:08] explanations. [04:10] Were you blank or blank? Were you angry [04:13] about what I said about the pickles [04:15] or did you have somewhere to be that you [04:17] just forgot about? [04:19] And then we're going to request feedback [04:22] and clarification [04:23] with the phrase, "What's going on?" So all [04:26] together [04:27] it should sound like this: I noticed that [04:29] you ran out of here in a hurry. [04:31] Were you angry about what I said about [04:32] the pickles or did you have somewhere [04:35] you needed to be that you forgot about? [04:37] What's going on?" In the pickle example, [04:40] she really was just running late and had [04:42] to race out of here to pick up her [04:43] parents from the airport. [04:45] But if I had ran with my assumption that [04:47] she genuinely [04:49] was really offended by my opinion on [04:51] pickles, [04:52] then I could have escalated it and [04:54] started a whole other fight that [04:56] never needed to happen. So remember, [04:59] don't assume why someone did something. [05:02] More often than not [05:03] you're probably wrong and if you want to [05:05] address behavior

that bothered you [05:07] without making the other person feel [05:09] attacked use the three-step process [05:12] of perception checking. Don't forget to [05:14] like and hit that subscribe button to be [05:16] notified [05:16] every time a new episode is released. If [05:19] you want to take part [05:20] in the Barton Blueprint for Emotional [05:22] Intelligence's mission to destigmatize [05:24] mental health [05:25] the most helpful thing you can do is [05:27] share this episode with your friends and [05:28] family. [05:30] The more people who share, the faster [05:32] this information is going to get out [05:33] into the world [05:34] to the people who really need it. Also if [05:37] you like this show [05:38] and want more information go ahead and [05:40] follow us on all of our social media. [05:42] There's a bunch of extra content like [05:44] infographics of some of the takeaway [05:45] tips and key concepts [05:47] as well as some fantastic mental health [05:49] quotes by many of the most notable names [05:51] in the field of psychology. The links are [05:53] down in the description below [05:55] and if you want to know more about any [05:57] of the research used in this episode [05:59] I always include the links in the [06:01] description below. [06:02] And as always, thank you for taking care [06:06] of each other [06:07] and taking care of yourself. I'll see you [06:09] next week.

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4.2 Your Body Language May Shape Who You Are: Amy Cuddy

[00:00] Translator: Joseph Geni Reviewer: Morton Bast [00:15] So I want to start by offering you a free no-tech life hack, [00:21] and all it requires of you is this: [00:24] that you change your posture for two nutes. [00:28] But before I give it away, I want to ask you to right now [00:31] do a little audit of your body and what you're doing with your body. [00:35] So how many of you are sort of making yourselves smaller? [00:37] Maybe you're hunching, crossing your legs, maybe wrapping your ankles. [00:41] Sometimes we hold onto our arms like this. [00:45] Sometimes we spread out. (Laughter)[00:48] I see you. [00:50] So I want you to pay attention to what you're doing right now. [00:53] We're going to come back to that in a few minutes, [00:56] and I'm hoping that if you learn to tweak this a little bit, [00:59] it could significantly change the way your life unfolds. [01:02] So, we're really fascinated with body language, [01:07] and we're particularly interested in other

people's body language. [01:11] You know, we're interested in, like, you know — (Laughter) — [01:15] an awkward interaction, or a smile, [01:19] or a contemptuous glance, or maybe a very awkward wink, [01:24] or maybe even something like a handshake. [01:27] Narrator: Here they are arriving at Number 10. [01:30] This lucky policeman gets to shake hands with the President of the United States. [01:35] Here comes the Prime Minister — No. (Laughter) (Applause) [01:40] (Laughter) (Applause) [01:42] Amy Cuddy: So a handshake, or the lack of a handshake, [01:46] can have us talking for weeks and weeks and weeks. [01:48] Even the BBC and The New York Times. [01:51] So obviously when we think about nonverbal behavior, [01:55] or body language — but we call it nonverbals as social scientists — [01:58] it's language, so we think about communication. [02:01] When we think about communication, we think about interactions. [02:04] So what is your body language communicating to me? [02:06] What's mine communicating to you? [02:08] And there's a lot of reason to believe that this is a valid way to look at this. [02:14] So social scientists have spent a lot of time [02:17] looking at the effects of our body language, [02:19] or other people's body language, on judgments. [02:21] And we make sweeping judgments and inferences from body language. [02:24] And those judgments can predict really meaningful life outcomes [02:28] like who we hire or promote, who we ask out on a date. [02:32] For example, Nalini Ambady, a researcher at Tufts University, [02:37] shows that when people watch 30-second soundless clips [02:41] of real physician-patient interactions, [02:44] their judgments of the physician's niceness [02:47] predict whether or not that physician will be sued. [02:50] So it doesn't have to do so much [02:52] with whether or not that physician was incompetent, [02:54] but do we like that person and how they interacted? [02:57] Even more dramatic, Alex Todorov at Princeton [03:00] has shown us that judgments of political candidates' faces [03:03] in just one second predict 70 percent [03:07] of U.S. Senate and gubernatorial race outcomes, [03:11] and even, let's go digital, [03:14] emoticons used well in online negotiations [03:18] can lead you to claim more value from that negotiation. [03:21] If you use them poorly, bad idea. Right? [03:24] So when we think of nonverbals, we think of how we judge others, [03:27] how they judge us and what the outcomes are. [03:30] We tend to forget, though, the other audience [03:32] that's influenced by our nonverbals, and that's ourselves. [03:35] We are also influenced by our nonverbals, [03:38]our thoughts and our feelings and our physiology. [03:41] So what nonverbals am I talking about? [03:44] I'm a social psychologist. I study prejudice, [03:47] and I teach at a competitive business school, [03:50] so it was inevitable that I would become interested in power dynamics.

[03:54] I became especially interested in nonverbal expressions [03:58] of power and dominance. [04:00] And what are nonverbal expressions of power and dominance? [04:03] Well, this is what they are. [04:05] So in the animal kingdom, they are about expanding. [04:08] So you make yourself big, you stretch out, [04:11] you take up space, you're basically opening up. [04:14] It's about opening up. [04:15] And this is true across the animal kingdom. [04:18] It's not just limited to primates. [04:21] And humans do the same thing. (Laughter) [04:24] So they do this both when they have power sort of chronically, [04:27] and also when they're feeling powerful in the moment. [04:30] And this one is especially interesting because it really shows us [04:33] how universal and old these expressions of power are. [04:38] This expression, which is known as pride, [04:40] Jessica Tracy has studied. [04:42] She shows that people who are born with sight [04:45] and people who are congenitally blind do this [04:48] when they win at a physical competition. [04:51] So when they cross the finish line and they've won, [04:53] it doesn't matter if they've never seen anyone do it. [04:56] They do this. [04:57] So the arms up in the V, the chin is slightly lifted. [04:59] What do we do when we feel powerless? [05:01] We do exactly the opposite. [05:03] We close up. We wrap ourselves up. [05:06] We make ourselves small. [05:07] We don't want to bump into the person next to us. [05:09] So again, both animals and humans do the same thing. [05:12] And this is what happens when you put together high and low power. [05:16] So what we tend to do when it comes to power [05:19] is that we complement the other's nonverbals. [05:22] So if someone is being really powerful with us, [05:24] we tend to make ourselves smaller. We don't mirror them. [05:27] We do the opposite of them. [05:29] So I'm watching this behavior in the classroom, [05:32] and what do I notice? [05:34] I notice that MBA students really exhibit the full range of power nonverbals. [05:42] So you have people who are like caricatures of alphas, [05:44] really coming into the room, they get right into the middle of the room [05:48] before class even starts, like they really want to occupy space. [05:51] When they sit down, they're sort of spread out. [05:53] They raise their hands like this. [05:55] You have other people who are virtually collapsing [05:58] when they come in. As soon they come in, you see it. [06:00] You see it on their faces and their bodies, [06:03] and they sit in their chair and they make themselves tiny, [06:05] and they go like this when they raise their hand. [06:08] I notice a couple of things about this. [06:10] One, you're not going to be surprised. [06:11] It seems to be related to gender. [06:13] So women are much more likely to do this kind of thing than men. [06:19] Women feel chronically less powerful than men, [06:22] so this is not

surprising. [06:23] But the other thing I noticed [06:25] is that it also seemed to be related to the extent [06:28] to which the students were participating, and how well they were participating. [06:32] And this is really important in the MBA classroom, [06:35] because participation counts for half the grade. [06:37] So business schools have been struggling with this gender grade gap. [06:42] You get these equally qualified women and men coming in [06:45] and then you get these differences in grades, [06:47] and it seems to be partly attributable to participation. [06:50] So I started to wonder, you know, okay, [06:53] so you have these people coming in like this, and they're participating. [06:57] Is it possible that we could get people to fake it [07:00] and would it lead them to participate more? [07:02] So my main collaborator Dana Carney, who's at Berkeley, [07:06] and I really wanted to know, can you fake it till you make it? [07:10] Like, can you do this just for a little while [07:12] and actually experience a behavioral outcome [07:15] that makes you seem more powerful? [07:17] So we know that our nonverbals govern how other people [07:20] think and feel about us. There's a lot of evidence. [07:23] But our question really was, [07:24] do our nonverbals govern how we think and feel about ourselves? [07:28] There's some evidence that they do. [07:31] So, for example, we smile when we feel happy, [07:35] but also, when we're forced to smile [07:38] by holding a pen in our teeth like this, it makes us feel happy. [07:42] So it goes both ways. [07:44] When it comes to power, it also goes both ways. [07:48] So when you feel powerful, [07:50] you're more likely to do this, [07:52] but it's also possible that when you pretend to be powerful, [07:58] you are more likely to actually feel powerful. [08:02] So the second question really was, you know, [08:05] so we know that our minds change our bodies, [08:07] but is it also true that our bodies change our minds? [08:12] And when I say minds, in the case of the powerful, [08:14] what am I talking about? [08:16] So I'm talking about thoughts and feelings [08:18] and the sort of physiological things that make up our thoughts and feelings, [08:22] and in my case, that's hormones. I look at hormones. [08:25] So what do the minds of the powerful versus the powerless look like? [08:29] So powerful people tend to be, not surprisingly, [08:33] more assertive and more confident, more optimistic. [08:37] They actually feel they're going to win even at games of chance. [08:41] They also tend to be able to think more abstractly. [08:45] So there are a lot of differences. They take more risks. [08:47] There are a lot of differences between powerful and powerless people. [08:51] Physiologically, there also are differences [08:53] on two key hormones: testosterone, which is the dominance hormone, [08:57] and cortisol, which is the stress hormone. [09:01] So what we find is that high-power alpha

males in primate hierarchies [09:08] have high testosterone and low cortisol, [09:12] and powerful and effective leaders [09:15] also have high testosterone and low cortisol. [09:17] So what does that mean? When you think about power, [09:20] people tended to think only about testosterone, [09:22] because that was about dominance. [09:24] But really, power is also about how you react to stress. [09:27] So do you want the high-power leader that's dominant, [09:30] high on testosterone, but really stress reactive? [09:33] Probably not, right? [09:35] You want the person who's powerful and assertive and dominant, [09:38] but not very stress reactive, the person who's laid back. [09:41] So we know that in primate hierarchies, [09:47] if an alpha needs to take over, [09:50] if an individual needs to take over an alpha role sort of suddenly, [09:54] within a few days, that individual's testosterone has gone up [09:57] significantly and his cortisol has dropped significantly. [10:01] So we have this evidence, both that the body can shape [10:04] the mind, at least at the facial level, [10:06] and also that role changes can shape the mind. [10:10] So what happens, okay, you take a role change, [10:13] what happens if you do that at a really minimal level, [10:15] like this tiny manipulation, this tiny intervention? [10:18] "For two minutes," you say, "I want you to stand like this, [10:21] and it's going to make you feel more powerful." [10:23] So this is what we did. [10:26] We decided to bring people into the lab and run a little experiment, [10:31] and these people adopted, for two minutes, [10:34] either high-power poses or low-power poses, [10:38] and I'm just going to show you five of the poses, [10:40] although they took on only two. [10:42] So here's one. [10:45] A couple more. [10:47] This one has been dubbed the "Wonder Woman" by the media. [10:51] Here are a couple more. [10:53] So you can be standing or you can be sitting. [10:55] And here are the low-power poses. [10:57] So you're folding up, you're making yourself small. [11:01] This one is very low-power. [11:03] When you're touching your neck, you're really protecting yourself. [11:07] So this is what happens. [11:09] They come in, they spit into a vial, [11:11] for two minutes, we say, "You need to do this or this." [11:14] They don't look at pictures of the poses. [11:16] We don't want to prime them with a concept of power. [11:19] We want them to be feeling power. [11:21] So two minutes they do this. [11:22] We then ask them, "How powerful do you feel?" on a series of items, [11:25] and then we give them an opportunity to gamble, [11:28] and then we take another saliva sample. [11:30] That's it. That's the whole experiment. [11:32] So this is what we find. [11:34] Risk tolerance, which is the gambling, [11:36] we find that when you are in the high-power pose condition, [11:40] 86 percent of you will gamble. [11:42] When you're in the low-power pose condition, [11:44] only 60 percent, and that's a whopping significant difference.

[11:48] Here's what we find on testosterone. [11:51] From their baseline when they come in, [11:53] high-power people experience about a 20-percent increase, [11:56] and low-power people experience about a 10-percent decrease. [12:01] So again, two minutes, and you get these changes. [12:04] Here's what you get on cortisol. [12:06] High-power people experience about a 25-percent decrease, [12:10] and the low-power people experience about a 15-percent increase. [12:14] So two minutes lead to these hormonal changes [12:17] that configure your brain [12:18] to basically be either assertive, confident and comfortable, [12:23] or really stress-reactive, and feeling sort of shut down. [12:28] And we've all had the feeling, right? [12:30] So it seems that our nonverbals do govern how we think and feel about ourselves, [12:36] so it's not just others, but it's also ourselves. [12:38] Also, our bodies change our minds. [12:40] But the next question, of course, [12:43] is, can power posing for a few minutes [12:45] really change your life in meaningful ways? [12:47] This is in the lab, it's this little task, it's just a couple of minutes. [12:51] Where can you actually apply this? [12:53] Which we cared about, of course. [12:55] And so we think where you want to use this is evaluative situations, [13:01] like social threat situations. [13:04] Where are you being evaluated, either by your friends? [13:07] For teenagers, it's at the lunchroom table. [13:09] For some people it's speaking at a school board meeting. [13:13] It might be giving a pitch or giving a talk like this [13:17] or doing a job interview. [13:19] We decided that the one that most people could relate to [13:22] because most people had been through, was the job interview. [13:25] So we published these findings, [13:28] and the media are all over it, [13:29] and they say, Okay, so this is what you do [13:32] when you go in for the job interview, right? [13:34] (Laughter) [13:35] You know, so we were of course horrified, and said, [13:37] Oh my God, no, that's not what we meant at all. [13:39] For numerous reasons, no, don't do that. [13:42] Again, this is not about you talking to other people. [13:44] It's you talking to yourself. [13:46] What do you do before you go into a job interview? You do this. [13:49] You're sitting down. You're looking at your iPhone — [13:52] or your Android, not trying to leave anyone out. [13:54] You're looking at your notes, [13:56] you're hunching up, making yourself small, [13:58] when really what you should be doing maybe is this, [14:00] like, in the bathroom, right? Do that. Find two minutes. [14:03] So that's what we want to test. Okay? [14:05] So we bring people into a lab, [14:07] and they do either high- or low-power poses again, [14:10] they go through a very stressful job interview. [14:13] It's five minutes long. They are being recorded. [14:16] They're being judged also, [14:18] and the judges are trained to give no nonverbal feedback, [14:23] so they look like this. [14:25] Imagine this is the person interviewing you. [14:27] So for five minutes,

nothing, and this is worse than being heckled. [14:31] People hate this. [14:33] It's what Marianne LaFrance calls "standing in social quicksand." [14:37] So this really spikes your cortisol. [14:39] So this is the job interview we put them through, [14:41] because we really wanted to see what happened. [14:43] We then have these coders look at these tapes, four of them. [14:46] They're blind to the hypothesis. They're blind to the conditions. [14:49] They have no idea who's been posing in what pose, [14:52] and they end up looking at these sets of tapes, [14:57] and they say, "We want to hire these people," [15:00] all the high-power posers. [15:01] "We don't want to hire these people. [15:03] We also evaluate these people much more positively overall." [15:07] But what's driving it? [15:08] It's not about the content of the speech. [15:10] It's about the presence that they're bringing to the speech. [15:13] Because we rate them on all these variables [15:16] related to competence, like, how well-structured is the speech? [15:19] How good is it? What are their qualifications? [15:22] No effect on those things. This is what's affected. [15:24] These kinds of things. [15:26] People are bringing their true selves, basically. [15:28] They're bringing themselves. [15:30] They bring their ideas, but as themselves, [15:32] with no, you know, residue over them. [15:34] So this is what's driving the effect, or mediating the effect. [15:39] So when I tell people about this, [15:42] that our bodies change our minds and our minds can change our behavior, [05:46] and our behavior can change our outcomes, they say to me, [15:49] "It feels fake." Right? [15:50] So I said, fake it till you make it. [15:52] It's not me. [15:54] I don't want to get there and then still feel like a fraud. [15:57] I don't want to feel like an impostor. [15:59] I don't want to get there only to feel like I'm not supposed to be here. [16:03] And that really resonated with me, [16:05] because I want to tell you a little story about being an impostor [16:08] and feeling like I'm not supposed to be here. [16:11] When I was 19, I was in a really bad car accident. [16:14] I was thrown out of a car, rolled several times. [16:17] I was thrown from the car. [16:19] And I woke up in a head injury rehab ward, [16:22] and I had been withdrawn from college, [16:24] and I learned that my IQ had dropped by two standard deviations, [16:30] which was very traumatic. [16:32] I knew my IQ because I had identified with being smart, [16:35] and I had been called gifted as a child. [16:37] So I'm taken out of college, I keep trying to go back. [16:41] They say, "You're not going to finish college. [16:43] Just, you know, there are other things for you to do, [16:45] but that's not going to work out for you." [16:47] So I really struggled with this, and I have to say, [16:51] having your identity taken from you, your core identity, [16:54] and for me it was being smart, [16:56] having that taken from you, [16:57] there's nothing that leaves you feeling more powerless than that. [17:00] So I felt entirely powerless.

[17:02] I worked and worked, and I got lucky, [17:04] and worked, and got lucky, and worked. [17:06] Eventually I graduated from college. [17:08] It took me four years longer than my peers, [17:10] and I convinced someone, my angel advisor, Susan Fiske, [17:15] to take me on, and so I ended up at Princeton, [17:17] and I was like, I am not supposed to be here. [17:20] I am an impostor. [17:22] And the night before my first-year talk, [17:24] and the first-year talk at Princeton is a 20-minute talk to 20 people. [17:27] That's it. [17:28] I was so afraid of being found out the next day [17:31] that I called her and said, "I'm quitting." [17:34] She was like, "You are not quitting, [17:35] because I took a gamble on you, and you're staying. [17:38] You're going to stay, and this is what you're going to do. [17:41] You are going to fake it. [17:42] You're going to do every talk that you ever get asked to do. [17:45] You're just going to do it and do it and do it, [17:48] even if you're terrified and just paralyzed [17:50] and having an out-of-body experience, [17:52] until you have this moment where you say, 'Oh my gosh, I'm doing it. [17:56] Like, I have become this. I am actually doing this.'" [17:59] So that's what I did. [18:00] Five years in grad school, [18:01] a few years, you know, I'm at Northwestern, [18:03] I moved to Harvard, I'm at Harvard, [18:05] I'm not really thinking about it anymore, but for a long time I had been thinking, [18:09] "Not supposed to be here." [18:11] So at the end of my first year at Harvard, [18:14] a student who had not talked in class the entire semester, [18:18] who I had said, "Look, you've gotta participate or else you're going to fail," [18:22] came into my office. I really didn't know her at all. [18:25] She came in totally defeated, and she said, [18:28] "I'm not supposed to be here." [18:35] And that was the moment for me. [18:37] Because two things happened. [18:38] One was that I realized, [18:40] oh my gosh, I don't feel like that anymore. [18:43] I don't feel that anymore, but she does, and I get that feeling. [18:46] And the second was, she is supposed to be here! [18:48] Like, she can fake it, she can become it. [18:50] So I was like, "Yes, you are! You are supposed to be here! [18:54] And tomorrow you're going to fake it, [18:56] you're going to make yourself powerful, and, you know — [18:58] (Applause) [19:04] And you're going to go into the classroom, [19:08] and you are going to give the best comment ever." [19:10] You know? And she gave the best comment ever, [19:13] and people turned around and were like, [19:15] oh my God, I didn't even notice her sitting there. (Laughter) [19:18] She comes back to me months later, [19:20] and I realized that she had not just faked it till she made it, [19:23] she had actually faked it till she became it. [19:25] So she had changed. [19:27] And so I want to say to you, don't fake it till you make it. [19:31] Fake it till you become it. [19:34] Do it enough until you actually become it and internalize. [19:38] The last thing I'm going to leave you with is this. [19:40] Tiny

tweaks can lead to big changes. [19:45] So, this is two minutes. [19:47] Two minutes, two minutes, two minutes. [19:49] Before you go into the next stressful evaluative situation, [19:52] for two minutes, try doing this, in the elevator, [19:55] in a bathroom stall, at your desk behind closed doors. [19:58] That's what you want to do. [20:00] Configure your brain to cope the best in that situation. [20:03] Get your testosterone up. Get your cortisol down. [20:05] Don't leave that situation feeling like, oh, I didn't show them who I am. [20:09] Leave that situation feeling like, [20:11] I really feel like I got to say who I am and show who I am. [20:14] So I want to ask you first, you know, both to try power posing, [20:20] and also I want to ask you to share the science, because this is simple. [20:25] I don't have ego involved in this. (Laughter) [20:27] Give it away. Share it with people, [20:29] because the people who can use it the most [20:31] are the ones with no resources and no technology [20:35] and no status and no power. [20:37] Give it to them because they can do it in private. [20:40] They need their bodies, privacy and two minutes, [20:42] and it can significantly change the outcomes of their life. [20:45] Thank you. [20:46] (Applause)

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4.2.1 Clinical Communication Skills-Nonverbal Communication: Consultation-Version 1 of 2

[00:11] Speaker 1: Come in! Mrs. Heskett? Speaker 2: Yes, that's right. Speaker 1: What can I [00:22] do for you? Speaker 2: Um, I've come for my repeat [00:26] prescription. Speaker 1: Which one is that? [00:30] Speaker 2: Um, I don't know. The yellow pills. Speaker 1: Okay. [00:39] Speaker 2: Actually, while I was here. Well I've been [00:45] getting. Um, I've been getting [00:49] headaches quite a lot lately. [00:58] Speaker 1: Anything else? [01:00] Speaker 2: Well it's happened before. My other [01:05] doctor thought it was migraine but I [01:09] mean they're there all the time at the [01:11] moment and I suppose I wondered whether [01:18] I ought to come off the pill? Speaker 1: So what [01:23] do you want me to deal with today? Speaker 2: Um, [01:28] well. I suppose. [01:34] Well I suppose my husband thinks that um [01:38] I ought to come off the pill because [01:42] I've been getting them. Actually, I'm [01:46] getting quite depressed [01:47] recently. [speaker 2 is crying] Speaker 1: It's okay to cry. [speaker 1 answers ringing phone] [01:51] Oh, hi. Oh, thanks for phoning. Yep, what [02:00] time do you reckon? 2:30? That'd be good. I'll [02:04] be looking forward to

seeing you there. Bit [02:06] caught up at the moment so can't really [02:09] talk. Yep, okay 2:30. Bye. Speaker 2: I think I'll come back when [02:15] you're bit less busy. Speaker 1: No, no. I want [02:18] to hear more about it.

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4.2.2 Clinical Communication Skills-Nonverbal Communication Consultation-Version 2 of 2

[00:08] Speaker 1: Come in. Speaker 2: Hello. Speaker 1: Ah, Mrs. Haskett. Come and sit down [00:13] please. Speaker 2: Thanks [00:14] Speaker 1: What can I do for you? Speaker 2: I've come for my [00:19] repeat prescription. Speaker 1: Okay, which one? Speaker 2: I [00:23] don't know. The yellow pills. Speaker 1: Oh, yes. Okay. [00:28] Yeah, we can sort that. Speaker 2: All right [00:30] Speaker 1: Anything else? Speaker 2: Well, yeah. I've been [00:36] getting quite a lot of headaches [00:39] lately. Speaker 1: Okay. Speaker 2: I've had them [00:45] before. My other doctor said it was [00:47] migraine. Speaker 1: Mm-hmm. Speaker 2: But I'm well I'm having [00:53] them all the time at the moment. Speaker 1: Okay. [00:58] Speaker 2: I was just wondering whether I should [01:00] come off the pill? Speaker 1: Okay, what makes you [01:04] say that? [01:05] Speaker 2: Well, it was my husband. He thinks I [01:09] should come off the pill because... I [01:16] don't know. I've been getting quite depressed recently. [speaker 2 is crying, the phone is ringing, speaker 1 gives speaker 2 a tissue] [01:19] Speaker 1: It's okay. That's okay. Speaker 2: Thank you. Speaker 1: Just [01:25] ignore the telephone. Speaker 2: Oh dear. I don't know. Maybe I [01:31] should come back when you're not so busy [01:33] Speaker 1: No, no, no, no. I need to hear more about this [01:44].

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5.5.1 Big Bang Theory Active Listening

[00:01] First there was Playstation aka PS1 then [00:05] PS2, PS3 and now PS4 and that makes [00:08] sense. You think after Xbox there'd be [00:11] Xbox 2 but no [00:12]

next came Xbox 360. Hmm. And now after 360 [00:17] comes Xbox One. By One maybe that's how [00:22] many seconds of thought they put into [00:24] naming it. Can you get the butter please? [00:27] Yeah, however with the Xbox One I can [00:30] control my entire entertainment system [00:32] using voice commands. Up until now I've [00:35] had to use Leonard. The other one. Pass [00:39] the butter. Get. Hang on! I don't feel like [00:43] you're taking this dilemma seriously. [00:45] Fine Sheldon, you have my undivided [00:49] attention. [00:49] Okay, now the PS4 is your angular and [00:54] sleek-looking. No way is true but the [00:58] larger size of the Xbox One may keep it [01:00] from overheating. You wouldn't want your [01:02] gaming system to overheat. [01:03] Nope. See what you absolutely would not [01:05] and then furthermore the Xbox One now [01:07] comes with a Kinect included. [01:10] Yes, not sold separately. Yeah. Although [01:15] the PS4 uses cool new gddr5 vram while [01:18] the Xbox One is still using the [01:20] conventional ddr3 memory. Why would they [01:22] still be using ddr3? Are they nuts? [01:26] See that's what I thought but then they [01:29] go and throw in an es Ram before is he [01:32] who's they dude Xbox you're kidding. No [01:36] this esram buffer should totally bridge [01:39] the 100 gigabit per second bandwidth gap [01:41] between the two rams types. This is a [01:43] nightmare. How will you ever make a [01:44] decision? Yeah, I go. What should I do?

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5.5.2 Improve Your Listening Skills with Active Listening

[00:08] Think about how much information you get every day from listening. [00:12] Your boss, your colleagues, your clients, and your suppliers may communicate with you often. [00:17] So will your family and friends. [00:20] How much of what all these people say do you pay attention to? [00:24] How much are you actually remembering from these conversations? [00:27] Chances are, it's a lot less than you think! [00:31] A lot of times, we act as if we're listening to the other person. But the reality is that our minds are racing to other topics, or already planning what we're going to say in return. [00:41] This means that we can miss important things that the other person is saying. [00:45] ACTIVE Listening is when you make a conscious effort to hear and understand people so that you get the complete message. [00:54] There are several things you can do to become an active listener. [00:58] First,

you need to pay attention. [01:00] We know this is a bit obvious, but it's the most important part of active listening. [01:05] For instance, make eye contact with the person talking to you. Ignore outside factors, like other conversations, [01:12] so that you can focus solely on what the person is saying. [01:16] Most importantly, put your own thoughts on hold. [01:19] Resist the urge to start planning out what you're going to say in return. [01:23] You also need to show the other person that you're listening to them. You can nod your head, smile, and say "yes" occasionally. [01:30] All of these signals let the other person know you're still with them. [01:34] Providing feedback on what the other person has just said is another important part of active listening. [01:40] For instance, all of us hear information through our own personal filters and judgments. This can affect our understanding. [01:48] To make sure you heard and understood the message correctly, [01:54] You can also ask questions to get more information. [01:57] But make sure that you listen to what they're saying BEFORE you plan your response! [02:03] You also need to avoid interrupting when they are speaking. Once they're finished, you can respond appropriately with an honest answer or opinion. [02:12] Active listening is a skill that all of us should use more often. The better you are at listening, the more information you'll receive. [02:20] This can pay off with big rewards in your career, and strengthen your bonds with family and friends. [02:26] You can find out more about active listening in the article that accompanies this video.

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5.5.3 Empathy: The Human Connection to Patient Care

[00:01] Could a greater miracle take place [00:03] than for us to look through each other's eyes [00:05] for an instant? [00:09] ♪ [00:13] Has been dreading this appointment. [00:16] Fears he waited too long. [00:21] ♪ [00:24] Wife's surgery went well. [00:26] Going home to rest. [00:29] ♪ [00:35] Day 29 Waiting for a new heart. [00:38] ♪ [00:43] 19 year-old son on life support. [00:50] ♪ [00:52] Doesn't completely understand. [00:57] ♪ [00:58] Too shocked to [01:00] comprehend treatment options. [01:02] ♪ [01:04] Waiting 3 hours. [01:10] ♪ [01:12] Husband is terminally ill. [01:18] Visiting Dad for the last time. [01:25] Celebrating 25th wedding anniversary. [01:29] ♪ [01:35] Wife had stroke. [01:38] Worried how he will take care of her. [01:42] Recently divorced. [01:48] Just found out he's going to be a dad. [01:51] ♪ [01:53] Daughter

is getting married on Saturday. [01:57] Determined to be there. [02:00] ♪ [02:03] Worried how he will pay for this. [02:10] ♪ [02:12] Tomorrow, first vacation in years. [02:18] ♪ [02:23] 7,000 miles from home. [02:29] ♪ [02:32] Nearing the end of a 12-hour shift. [02:37] ♪ [02:42] 7 years cancer free. [02:45] ♪ [02:48] Hoping to hold her today. [02:54] ♪ [02:56] They saw "something" on her mammogram. [03:03] ♪ [03:05] Just signed DNR (Do-Not-Resuscitate) [03:08] ♪ [03:13] Always wanted a child of her own. [03:16] ♪ [03:20] Ears all better. Finally! [03:25] ♪ [03:28] Car accident 6 months ago. [03:32] Pain won't go away. [03:36] ♪ [03:37] Tumor was benign. [03:41] Tumor was malignant. [03:45] ♪ [03:46] If you could stand in someone else's shoes... [03:48] ♪ [03:52] Hear what they hear. [03:55] ♪ [03:58] See what they see. [04:01] ♪ [04:05] Feel what they feel. [04:08] ♪ [04:11] Would you treat them differently? [04:16] ♪

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5.5.4 5 Ways to Listen Better

[00:15] We are losing our listening. [00:18] We spend roughly 60 percent of our communication time listening, [00:22] but we're not very good at it. [00:24] We retain just 25 percent of what we hear. [00:26] Now — not you, not this talk, [00:28] but that is generally true. [00:29] (Laughter) [00:31] Let's define listening as making meaning from sound. [00:34] It's a mental process, [00:36] and it's a process of extraction. [00:39] We use some pretty cool techniques to do this. [00:41] One of them is pattern recognition. [00:43] (Crowd noises) So in a cocktail party like this, [00:45] if I say, "David, Sara, pay attention" — some of you just sat up. [00:49] We recognize patterns to distinguish noise from signal, [00:53] and especially our name. [00:55] Differencing is another technique we use. [00:57] If I left this pink noise on for more than a couple of minutes, [01:00] (Pink noise) you would literally cease to hear it. [01:03] We listen to differences; we discount sounds that remain the same. [01:08] And then there is a whole range of filters. [01:11] These filters take us from all sound [01:13] down to what we pay attention to. [01:15] Most people are entirely unconscious of these filters. [01:19] But they actually create our reality in a way, [01:22] because they tell us what we're paying attention to right now. [01:25] I'll give you one example of that. [01:27] Intention is very important in sound, in listening. [01:30] When I married my wife, [01:32] I promised her I would listen to her every day [01:34] as if for the first time. [01:37] Now that's something I fall short of on a daily

basis. [01:40] (Laughter) [01:41] But it's a great intention to have in a relationship. [01:44] (Laughter) [01:45] But that's not all. [01:47] Sound places us in space and in time. [01:50] If you close your eyes right now in this room, [01:52] you're aware of the size of the room [01:55] from the reverberation and the bouncing of the sound off the surfaces; [01:58] you're aware of how many people are around you, [02:01] because of the micro-noises you're receiving. [02:03] And sound places us in time as well, [02:06] because sound always has time embedded in it. [02:09] In fact, I would suggest that our listening is the main way [02:12] that we experience the flow of time [02:14] from past to future. [02:17] So, "Sonority is time and meaning" — a great quote. [02:20] I said at the beginning, we're losing our listening. [02:22] Why did I say that? [02:23] Well, there are a lot of reasons for this. [02:25] First of all, we invented ways of recording — [02:28] first writing, then audio recording and now video recording as well. [02:31] The premium on accurate and careful listening has simply disappeared. [02:36] Secondly, the world is now so noisy, [02:39] (Noise) with this cacophony going on visually and auditorily, [02:44] it's just hard to listen; [02:46] it's tiring to listen. [02:48] Many people take refuge in headphones, [02:50] but they turn big, public spaces like this, [02:53] shared soundscapes, [02:55] into millions of tiny, little personal sound bubbles. [02:59] In this scenario, nobody's listening to anybody. [03:03] We're becoming impatient. [03:05] We don't want oratory anymore; we want sound bites. [03:08] And the art of conversation is being replaced — dangerously, I think — [03:12] by personal broadcasting. [03:14] I don't know how much listening there is in this conversation, [03:18] which is sadly very common, especially in the UK. [03:21] We're becoming desensitized. [03:23] Our media have to scream at us with these kinds of headlines [03:26] in order to get our attention. [03:28] And that means it's harder for us to pay attention [03:31] to the quiet, the subtle, the understated. [03:35] This is a serious problem that we're losing our listening. [03:38] This is not trivial, [03:40] because listening is our access to understanding. [03:44] Conscious listening always creates understanding, [03:47] and only without conscious listening [03:50] can these things happen. [03:52] A world where we don't listen to each other at all [03:55] is a very scary place indeed. [03:59] So I'd like to share with you five simple exercises, [04:02] tools you can take away with you, [04:04] to improve your own conscious listening. [04:06] Would you like that? [04:07] Audience: Yes! [04:08] Good. The first one is silence. [04:11] Just three minutes a day of silence is a wonderful exercise [04:15] to reset your ears and to recalibrate, [04:17] so that you can hear the quiet again. [04:20] If you can't get absolute silence, [04:21] go for quiet, that's absolutely fine. [04:24] Second, I call this "the mixer." [04:27] (Noise) So even

if you're in a noisy environment like this — [04:31] and we all spend a lot of time in places like this — [04:33] listen in the coffee bar to how many channels of sound can I hear? [04:37] How many individual channels in that mix am I listening to? [04:40] You can do it in a beautiful place as well, like in a lake. [04:44] How many birds am I hearing? [04:45] Where are they? Where are those ripples? [04:47] It's a great exercise for improving the quality of your listening. [04:52] Third, this exercise I call "savoring," and this is a beautiful exercise. [04:56] It's about enjoying mundane sounds. [04:58] This, for example, is my tumble dryer. [05:01] (Dryer) [05:02] It's a waltz — one, two, three; one, two, three; one, two, three. [05:07] I love it! [05:08] Or just try this one on for size. [05:10] (Coffee grinder) [05:19] Wow! [05:21] So, mundane sounds can be really interesting — [05:23] if you pay attention. [05:24] I call that the "hidden choir" — it's around us all the time. [05:28] The next exercise is probably the most important of all of these, [05:32] if you just take one thing away. [05:33] This is listening positions — [05:35] the idea that you can move your listening position [05:39] to what's appropriate to what you're listening to. [05:41] This is playing with those filters. [05:43] Remember I gave you those filters? [05:45] It's starting to play with them as levers, [05:47] to get conscious about them and to move to different places. [05:50] These are just some of the listening positions, [05:52] or scales of listening positions, that you can use. [05:54] There are many. [05:56] Have fun with that. It's very exciting. [05:58] And finally, an acronym. [06:00] You can use this in listening, in communication. [06:03] If you're in any one of those roles — [06:05] and I think that probably is everybody who's listening to this talk — [06:09] the acronym is RASA, [06:11] which is the Sanskrit word for "juice" or "essence." [06:15] And RASA stands for "Receive," which means pay attention to the person; [06:20] "Appreciate," making little noises like "hmm," "oh," "OK"; [06:23] "Summarize" — the word "so" is very important in communication; [06:27] and "Ask," ask questions afterwards. [06:30] Now sound is my passion, it's my life. [06:32] I wrote a whole book about it. So I live to listen. [06:35] That's too much to ask for most people. [06:38] But I believe that every human being needs to listen consciously [06:41] in order to live fully — [06:44] connected in space and in time to the physical world around us, [06:47] connected in understanding to each other, [06:50] not to mention spiritually connected, [06:52] because every spiritual path I know of has listening and contemplation [06:56] at its heart. [06:57] That's why we need to teach listening in our schools as a skill. [07:03] Why is it not taught? It's crazy. [07:06] And if we can teach listening in our schools, [07:08] we can take our listening off that slippery slope [07:11] to that dangerous, scary world that I talked about, [07:13] and move it

to a place where everybody is consciously listening all the time, [07:17] or at least capable of doing it. [07:19] Now, I don't know how to do that, [07:21] but this is TED, [07:23] and I think the TED community is capable of anything. [07:26] So I invite you to connect with me, connect with each other, [07:29] take this mission out. [07:31] And let's get listening taught in schools, [07:33] and transform the world in one generation [07:35] to a conscious, listening world — a world of connection, [07:37] a world of understanding [07:39] and a world of peace. [07:40] Thank you for listening to me today. [07:42] (Applause)

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6.6 Hope in Work

[00:00] Hi everyone. My name is Sarah Mike and [00:02] I'm head of psychological services in [00:04] about fast just we're working in [00:07] difficult times in Health and Social [00:09] Care and there are new challenges and [00:11] worries as we come on to shift or into [00:14] work [00:14] we're leaving families and friends and [00:17] our ongoing concerns for them and for [00:20] ourselves and these can make the [00:22] transition into work both emotionally [00:24] and in our thinking were difficult than [00:27] usual following exercise is called hope [00:30] and work that is hoped that it will help [00:33] you prepare mentally and emotionally for [00:36] the day or shift ahead as you begin to [00:40] start your day or shift take five [00:42] minutes to prepare for the work ahead [00:45] take a moment to refocus from all the [00:48] responsibilities and business of home [00:50] and turn your mind towards work take a [00:54] moment at the start of this shift to [00:56] find your breath breathe in deeply fill [01:02] your lungs to fill capacity to hold for [01:05] a little moment and then release take a [01:10] few deep breath and connect with your [01:13] breathing find the flow that works for [01:17] you your own comfortable rhythm our [01:22] breath is at the center of our wellness [01:26] as you're prepared to move into this [01:28] shift remind yourself of the skills and [01:31] knowledge that you bring with you and [01:34] remembering keep attention on your [01:36] breath notice if it shifts and becomes [01:40] more rapid or more shallow take control [01:43] of it again [01:44] breathing deeply finding your own [01:48] comfortable and relaxed rhythm feel your [01:52] Center in return acknowledge that [01:56] throughout the day you may lose sight of [01:59] your skills and feel anxious it may

be [02:03] helpful to keep a few messages in [02:04] millions throughout the day which you [02:07] can use to remind yourself and your [02:09] colleagues of your skills and theirs [02:13] these may include repeating statements [02:16] such as and I can cook right now I am [02:20] supported by my team this situation will [02:26] not last forever this does not feel good [02:31] but it will pass I feel upset but I can [02:36] accept I am feeling right now and I am [02:40] strong enough to get through this and as [02:45] you continue that calm breath I want you [02:48] to squeeze your thumb and middle finger [02:50] of your right hand together and as you [02:55] squeeze and tightly together be reminded [02:59] of your knowledge your skill set and [03:03] your strength [03:05] if you feel anxious throughout the day [03:08] squeeze the thumb and middle finger of [03:12] your right hand together as a reminder [03:13] of this and as a reminder to recenter [03:17] your breath and a trigger to return to [03:21] the present reminding yourself that I am [03:24] strong enough to get through this and I [03:28] can cook right now and for a moment as [03:32] you move into work gently close your [03:34] eyes take a few moments to yourself and [03:39] as you move into shift or into the day [03:43] re pledge what you can bring I can bring [03:48] all my knowledge and skill I bring my [03:51] compassion and care to each patient I [03:56] bring my compassion and care to each [03:59] colleague I bring my compassion and care [04:04] to myself I can do my best and expect no [04:09] more of myself and we can expect no more [04:13] of each other [04:17] and so with your next full breath and [04:21] bad these pledges into your shift or [04:24] into your day ahead with the next breath [04:28] leave all other aspects of you behind [04:32] move into the professional you please [04:37] apparent the child a sibling to be [04:41] picked up again later on your way home [04:45] be confident in the systems that you've [04:48] put in place for others care focus on [04:54] the shift from the day ahead [04:59] and throughout the day as your mind [05:01] moves into the past or to the future [05:07] with each breath that you take remind [05:09] yourself of your pledges remind yourself [05:15] that you are strong enough to get [05:17] through this that you can cope right now [05:21] and that you are supported and [05:24] supporting of those around you [05:30] remind yourself to squeeze your fingers [05:33] together as a trigger memory to focus on [05:36] present [05:39] and so on your next breath open your [05:43] eyes and move into work calmly and ready [05:49] to face whatever the day presents to me.

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6.7.1 Effective Interview Introduction

[00:00:03] Speaker 1: Hello, Mr. Almond. My name is Malaya Bautista. I am a registered nurse. How should I refer to you? [00:00:10] Speaker 2: Oh, you can call me Francisco. [00:00:11] Speaker 1: Thank you, Francisco. And who is with you today? [00:00:13] Speaker 2: Well, this is my daughter Ainsley. [00:00:13] Speaker 1: Hello, Ainsley. [00:00:17] Speaker 3: Hi.

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6.7.2 Ineffective Interview Introduction

[00:00:03] Speaker 1: Hello, this must be your daughter. I'm glad you came in with your dad today. How has he been sleeping? [00:00:09] Speaker 2: Um. I'm not sure you could ask him.

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6.9.1 False Reassurance

[00:00:03] Speaker 1: OK, Millie, I'm going to wheel you to the operating room in about half an hour. Do you need anything right now? [00:00:08] Speaker 2: Um. No, I don't think so. [00:00:10] Speaker 1: OK, are you sure? [00:00:11] Speaker 2: Well, I'm just really scared if I don't wake up from my surgery. [00:00:15] Speaker 1: Ohh Millie, you don't have to worry about that. That won't happen. You have an excellent team and they're going to make sure you wake up from the surgery. They've done many types of these procedures before.

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6.9.2 How to Avoid False Reassurance

[00:00:03] Speaker 1: OK, Millie, I'm going to wheel you to the operating room in about half an hour. Do you need anything right now? [00:00:09] Speaker 2: Um. No, I don't think so. [00:00:10] Speaker 1: OK, are you sure? [00:00:12] Speaker 2: Well, I'm just scared if I won't wake up from my surgery. [00:00:17] Speaker 1: Can you tell me a little bit more about what's making you feel scared about not waking up from the surgery? [00:00:21] Speaker 2: Well, a doctor told my mum that there's a possibility that I won't wake up from my surgery. [00:00:25] Speaker 1: The doctor has to explain all of the risks before starting the surgery. Did the doctor also tell you that this risk is very, very low? [00:00:34] Speaker 2: No. It is?

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8.1 Why Good Leaders Make You Feel Safe

[00:12] There's a man by the name of Captain [00:15] William Swenson [00:17] who recently was awarded the congressional Medal of Honor [00:20] for his actions on September 8, 2009. [00:25] On that day, a column of American [00:27] and Afghan troops [00:29] were making their way [00:30] through a part of Afghanistan [00:33] to help protect [00:36] a group of government officials, [00:38] a group of Afghan government officials, [00:39] who would be meeting with some local [00:42] village elders. [00:43] The column came under ambush, [00:45] and was surrounded on three sides, [00:48] and amongst many other things, [00:51] Captain Swenson was recognized [00:52] for running into live fire [00:55] to rescue the wounded [00:56] and pull out the dead. [01:00] One of the people he rescued was a sergeant, [01:03] and he and a comrade were making their way [01:05] to a medevac helicopter. [01:08] And what was remarkable about this day [01:10] is, by sheer coincidence, [01:12] one of the medevac medics [01:13] happened to have a GoPro camera on his helmet [01:16] and captured the whole scene on camera. [01:21] It shows Captain Swenson and his comrade [01:24] bringing this wounded soldier [01:25] who had received a gunshot to the neck. [01:30] They put him in the helicopter, [01:33] and then you see Captain Swenson bend over [01:37] and give him a kiss [01:40] before he turns around to rescue more. [01:44] I saw this, and I thought to myself, [01:48]

where do people like that come from? [01:50] What is that? That is some deep, deep emotion, [01:53] when you would want to do that. [01:55] There's a love there, [01:57] and I wanted to know why is it that [01:59] I don't have people that I work with like that? [02:02] You know, in the military, they give medals [02:03] to people who are willing to sacrifice themselves [02:06] so that others may gain. [02:08] In business, we give bonuses to people [02:10] who are willing to sacrifice others [02:11] so that we may gain. [02:13] We have it backwards. Right? [02:17] So I asked myself, where do people like this come from? [02:19] And my initial conclusion was that they're just better people. [02:22] That's why they're attracted to the military. [02:23] These better people are attracted [02:25] to this concept of service. [02:27] But that's completely wrong. [02:29] What I learned was that it's the environment, [02:31] and if you get the environment right, [02:34] every single one of us has the capacity [02:35] to do these remarkable things, [02:37] and more importantly, others have that capacity too. [02:40] I've had the great honor of getting to meet [02:42] some of these, who we would call heroes, [02:45] who have put themselves and put their lives [02:47] at risk to save others, [02:49] and I asked them, "Why would you do it? [02:51] Why did you do it?" [02:53] And they all say the same thing: [02:56] "Because they would have done it for me." [02:58] It's this deep sense of trust and cooperation. [03:01] So trust and cooperation are really important here. [03:04] The problem with concepts of trust and cooperation [03:07] is that they are feelings, they are not instructions. [03:09] I can't simply say to you, "Trust me," and you will. [03:12] I can't simply instruct two people to cooperate, and they will. [03:16] It's not how it works. It's a feeling. [03:18] So where does that feeling come from? [03:20] If you go back 50,000 years [03:22] to the Paleolithic era, [03:24] to the early days of Homo sapiens, [03:26] what we find is that the world [03:27] was filled with danger, [03:30] all of these forces working very, very hard to kill us. [03:34] Nothing personal. [03:36] Whether it was the weather, [03:38] lack of resources, [03:40] maybe a saber-toothed tiger, [03:41] all of these things working [03:43] to reduce our lifespan. [03:45] And so we evolved to social animals, [03:47] where we lived together and worked together [03:49] in what I call a circle of safety, inside the tribe, [03:52] where we felt like we belonged. [03:54] And when we felt safe amongst our own, [03:57] the natural reaction was trust and cooperation. [04:00] There are inherent benefits to this. [04:01] It means I can fall asleep at night [04:03] and trust that someone from within my tribe will watch for danger. [04:07] If we don't trust each other, if I don't trust you, [04:09] that means you won't watch for danger. [04:11] Bad system of survival. [04:13] The modern day is exactly the same

thing. [04:15] The world is filled with danger, [04:17] things that are trying to frustrate our lives [04:18] or reduce our success, [04:20] reduce our opportunity for success. [04:21] It could be the ups and downs in the economy, [04:24] the uncertainty of the stock market. [04:26] It could be a new technology that renders [04:28] your business model obsolete overnight. [04:30] Or it could be your competition [04:32] that is sometimes trying to kill you. [04:34] It's sometimes trying to put you out of business, [04:36] but at the very minimum [04:37] is working hard to frustrate your growth [04:40] and steal your business from you. [04:42] We have no control over these forces. [04:44] These are a constant, [04:45] and they're not going away. [04:47] The only variable are the conditions [04:49] inside the organization, [04:52] and that's where leadership matters, [04:54] because it's the leader that sets the tone. [04:56] When a leader makes the choice [04:59] to put the safety and lives [05:00] of the people inside the organization first, [05:03] to sacrifice their comforts and sacrifice [05:06] the tangible results, so that the people remain [05:09] and feel safe and feel like they belong, [05:11] remarkable things happen. [05:13] I was flying on a trip, [05:17] and I was witness to an incident [05:19] where a passenger attempted to board [05:21] before their number was called, [05:24] and I watched the gate agent [05:27] treat this man like he had broken the law, [05:29] like a criminal. [05:31] He was yelled at for attempting to board [05:32] one group too soon. [05:35] So I said something. [05:36] I said, "Why do you have treat us like cattle? [05:39] Why can't you treat us like human beings?" [05:42] And is is exactly what she said to me. [05:44] She said, "Sir, if I don't follow the rules, [05:47] I could get in trouble or lose my job." [05:50] All she was telling me [05:51] is that she doesn't feel safe. [05:53] All she was telling me is that [05:55] she doesn't trust her leaders. [05:59] The reason we like flying Southwest Airlines [06:01] is not because they necessarily hire better people. [06:04] It's because they don't fear their leaders. [06:07] You see, if the conditions are wrong, [06:09] we are forced to expend our own time and energy [06:11] to protect ourselves from each other, [06:14] and that inherently weakens the organization. [06:17] When we feel safe inside the organization, [06:19] we will naturally combine our talents [06:21] and our strengths and work tirelessly [06:23] to face the dangers outside [06:25] and seize the opportunities. [06:28] The closest analogy I can give [06:29] to what a great leader is, is like being a parent. [06:33] If you think about what being a great parent is, [06:34] what do you want? What makes a great parent? [06:36] We want to give our child opportunities, [06:37] education, discipline them when necessary, [06:40] all so that they can grow up and achieve more [06:42] than we could for ourselves. [06:45] Great leaders want exactly

the same thing. [06:47] They want to provide their people opportunity, [06:48] education, discipline when necessary, [06:50] build their self-confidence, give them the opportunity to try and fail, [06:53] all so that they could achieve more [06:55] than we could ever imagine for ourselves. [06:59] Charlie Kim, who's the CEO of a company called Next Jump [07:02] in New York City, a tech company, [07:05] he makes the point that [07:06] if you had hard times in your family, [07:09] would you ever consider laying off one of your children? [07:12] We would never do it. [07:13] Then why do we consider laying off people [07:15] inside our organization? [07:17] Charlie implemented a policy [07:20] of lifetime employment. [07:21] If you get a job at Next Jump, [07:23] you cannot get fired for performance issues. [07:27] In fact, if you have issues, [07:29] they will coach you and they will give you support, [07:32] just like we would with one of our children [07:33] who happens to come home with a C from school. [07:36] It's the complete opposite. [07:37] This is the reason so many people [07:38] have such a visceral hatred, anger, [07:43] at some of these banking CEOs [07:44] with their disproportionate salaries and bonus structures. [07:47] It's not the numbers. [07:49] It's that they have violated the very definition of leadership. [07:52] They have violated this deep-seated social contract. [07:55] We know that they allowed their people [07:57] to be sacrificed so they could protect their own interests, [07:59] or worse, they sacrificed their people [08:02] to protect their own interests. [08:04] This is what so offends us, not the numbers. [08:07] Would anybody be offended if we gave [08:08] a $150 million bonus to Gandhi? [08:11] How about a $250 million bonus to Mother Teresa? [08:14] Do we have an issue with that? None at all. [08:16] None at all. [08:18] Great leaders would never sacrifice [08:20] the people to save the numbers. [08:21] They would sooner sacrifice the numbers [08:23] to save the people. [08:26] Bob Chapman, who runs [08:28] a large manufacturing company in the Midwest [08:30] called Barry-Wehmiller, [08:33] in 2008 was hit very hard by the recession, [08:38] and they lost 30 percent of their orders overnight. [08:42] Now in a large manufacturing company, [08:43] this is a big deal, [08:45] and they could no longer afford their labor pool. [08:48] They needed to save 10 million dollars, [08:49] so, like so many companies today, [08:51] the board got together and discussed layoffs. [08:55] And Bob refused. [08:56] You see, Bob doesn't believe in head counts. [09:01] Bob believes in heart counts, [09:04] and it's much more difficult to simply reduce [09:07] the heart count. [09:08] And so they came up with a furlough program. [09:11] Every employee, from secretary to CEO, [09:13] was required to take four weeks of unpaid vacation. [09:17] They could take it any time they wanted, [09:19] and they did not have to take it consecutively.

[09:22] But it was how Bob announced the program [09:23] that mattered so much. [09:25] He said, it's better that we should all suffer a little [09:28] than any of us should have to suffer a lot, [09:30] and morale went up. [09:34] They saved 20 million dollars, [09:37] and most importantly, as would be expected, [09:39] when the people feel safe and protected by the leadership in the organization, [09:42] the natural reaction is to trust and cooperate. [09:45] And quite spontaneously, nobody expected, [09:47] people started trading with each other. [09:49] Those who could afford it more [09:51] would trade with those who could afford it less. [09:53] People would take five weeks [09:54] so that somebody else only had to take three. [09:59] Leadership is a choice. It is not a rank. [10:02] I know many people at the seniormost [10:03] levels of organizations [10:04] who are absolutely not leaders. [10:06] They are authorities, and we do what they say [10:09] because they have authority over us, [10:12] but we would not follow them. [10:13] And I know many people [10:15] who are at the bottoms of organizations [10:17] who have no authority [10:18] and they are absolutely leaders, [10:20] and this is because they have chosen to look after [10:22] the person to the left of them, [10:23] and they have chosen to look after [10:25] the person to the right of them. [10:27] This is what a leader is. [10:31] I heard a story [10:34] of some Marines [10:36] who were out in theater, [10:39] and as is the Marine custom, [10:41] the officer ate last, [10:44] and he let his men eat first, [10:47] and when they were done, [10:49] there was no food left for him. [10:53] And when they went back out in the field, [10:55] his men brought him some of their food [10:58] so that he may eat, [11:00] because that's what happens. [11:02] We call them leaders because they go first. [11:05] We call them leaders because they take the risk [11:07] before anybody else does. [11:08] We call them leaders because they will choose [11:10] to sacrifice so that their people [11:12] may be safe and protected [11:14] and so their people may gain, [11:16] and when we do, the natural response [11:19] is that our people will sacrifice for us. [11:23] They will give us their blood and sweat and tears [11:25] to see that their leader's vision comes to life, [11:29] and when we ask them, "Why would you do that? [11:31] Why would you give your blood and sweat and tears [11:34] for that person?" they all say the same thing: [11:38] "Because they would have done it for me." [11:41] And isn't that the organization [11:43] we would all like to work in? [11:45] Thank you very much. [11:48] Thank you. (Applause) [11:51] Thank you. (Applause)

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11.3 Improving Intercultural Communication

[00:00] [instrumental music and bird calls] [00:14] Indigenous peoples thrived on the lands of present day Canada for thousands of years. [00:20] About 500 years ago, Europeans began to arrive. [00:24] By the 1900s, an explicit colonial agenda to control and assimilate [00:30] Indigenous peoples was in place. [00:33] The impacts of this are still felt today and show up as a larger burden [00:38] of ill health, loss of language and culture, [00:41] dislocation, and marginalization. [00:44] This history is part of Canada and we all share a responsibility for healing relationships. [00:52] How do we do this? [00:55] Creating an environment of cultural safety in health care settings is one step toward [01:01] healing this relationship. [01:04] [instrumental music] [01:11] Cultural safety is achieved when people of diverse cultural and ethnic backgrounds feel [01:16] respected and safe from discrimination. [01:20] At Northern Health, our values include empathy, [01:23] respect, collaboration, and innovation. [01:28] When we put these values in action, we strive to [01:31] honour diversity, genuinely care, [01:34] and build trust through understanding. [01:38] Cultural safety grows when these values are applied to the context of cultural differences. [01:44] How can we do this? [01:46] By developing our cultural awareness, sensitivity, and competency through cultural humility. [01:54] Let's take a look at the meaning of each of these terms. [01:58] [instrumental music] [02:03] Cultural humility is a lifelong journey of self-evaluation, reflection, and learning [02:10] to deepen our understanding of how our life experiences influence how we understand and [02:16] interact with others. The skills of self-reflection and assessment carry us [02:22] along a path of understanding and change. [02:26] The journey often starts with cultural awareness – recognizing that differences [02:32] and similarities exist between cultures. Learning about the histories that impact Indigenous [02:39] peoples in Canada is an important part of developing cultural awareness. [02:45] Cultural sensitivity grows when we start to see the influences of our own culture and [02:50] acknowledge that we have biases. [02:53] This can be an eye-opening experience, and it may take courage and humility to walk this path. [03:01] Cultural sensitivity is not about treating everyone the same. [03:06] With cultural awareness and sensitivity comes a responsibility to act respectfully. [03:13] Cultural competency is about developing practical skills for interacting [03:19] in respectful ways with people who are different from us. [03:22] It's about reducing the number of assumptions we make about people based on our biases. [03:29] Cultural

competency does not require us to become experts in cultures different from our own. [03:36] Cultural safety improves as we proceed along this path of self-reflection and learning. [03:44] The goal of culturally safe health care is that people feel respected [03:49] and safe from discrimination when they access health services. [03:54] As health care practitioners and service providers, we have an opportunity and a responsibility [04:01] to provide the best quality care possible to all individuals, [04:06] and this involves developing our cultural competence through humility. [04:11] Along this journey, we begin to understand and appreciate the gifts that each of us brings to the table. [04:19] Together, we can work to ensure that everyone is able to maintain their dignity [04:25] when they are seeking care and at their most vulnerable. [04:29] We can, as individuals and as organizations, [04:34] foster trusting and respectful relationships [04:37] between Indigenous and non-Indigenous people and communities. [04:43] So our journey begins. [04:46] [instrumental music and bird calls]

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Version History

This page provides a record of edits and changes made to this book since its initial publication in the MacEwan Open Books collection. Whenever the authors make edits or updates to the text they provide a record and description of those changes here.

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