Objectives

Identify current comfort levels and growing edges when engaging with other groups

Discuss various theories of communication related to health care and practical applications

Apply new techniques for personal comfort and professional practice

Overview

“Out” groups and “In” groups
  ◦ Research on attitudes
  ◦ Tweak areas
  ◦ Increasing comfort
Overview

Communication
- Theories
- Health connections
- Practical Applications
- Discussion of case studies

Overview

Application and practice
- Silence
- Listening
- Attunement
- Noticing
- Affirmation

“Out” groups and “In” groups

Attitude—“a psychological tendency that is expressed by evaluating a particular entity with some degree of favor or disfavor.” (Eagly & Chaiken, 1998)

Prejudice—Gordon Alport (1979)

"feeling, favorable or unfavorable, toward a person or thing, prior to, or not based on, actual experience”

“Tweak area”
“Out” groups and “In” groups

“Tweak areas”:

- Ethnicity
- Language
- Gender
- Gender identity
- Religion/Spirituality/Belief system
- Sexual orientation
- Age
- Class
- Ability
- Personality (ENTJ, ISFP)
- Others...?

“Out” groups and “In” groups

Theory of Planned Behavior (Ajzen, 1985)

Powerful and predictive model of human behavior

- Attitudes toward behavior
- Subjective norms
- Perceived Behavioral Control
  = greater Behavioral Intention (Ajzen, 2002)

How well do we believe we can “show up” when “tweaked”?

“Out” groups and “In” groups

Pettigrew & Tropp (2008)

Meta-analysis of 515 studies
¾ million participants, 38 nations

Intergroup contact reduces prejudice

Mediated by
- enhancing knowledge (less predictive)
  reducing anxiety
- increasing empathy and perspective taking
“Out” groups and “In” groups

Increasing comfort:

- Knowledge
- Comfort
- Self-Awareness
- Practice

Communication and Health

Theories and Health connections

- Health Belief Model (1950s US Public Health Service)
- Social Cognitive Theory (Miller & Dollard 1940s, Bandura 1960s-)
- Elaboration Likelihood Model Petty & Cacioppo, 1979)
- Transtheoretical Model; Stages of Change (DiClemente & Prochaska, 1970s-1980s)

Communication and Health

Perceived threat
Perceived self-efficacy
Perceived support

Comfort, trust, and connection
- Treatment adherence
- Disclosure
- Outcome Satisfaction
- Faith
- Hope—(cognitive behavioral construct, CR Snyder)
Practical Applications

SOLER (squarely, open, lean, eye, relaxed)

NURSE (name, understand, respect, support, explore)

SPIKES (setup, perception, invitation, knowledge, emotion, summarize)

Back, Arnold, & Tulsky (2009) Mastering Communication with Seriously Ill Patients

Practical Applications


Practical Applications

Less about words, more about presence

SOLER (squarely, open, lean, eye, relaxed)

More than that...

Discussion of case studies

Concentration "frown"

Breathing with...

Moaning to singing...
Application and practice

Silence
Listening
Attunement
Noticing
Me
Them
Us

References


