Communicating with Patients and Caregivers

Talking about ACEs can sometimes make patients and their families feel uncomfortable. However, there are several communication tactics that can help physicians put patients and their families more at ease.

**Active Listening Skills**

Demonstrate active listening by listening to the individual with your ears and observing non-verbal body language with your eyes.

<table>
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<tr>
<th>Hearing</th>
<th>vs.</th>
<th>Listening</th>
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<td>Hearing is a biological act. Hearing requires only that we receive the message using our sense of hearing. Listening is an intellectual act.</td>
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<td>Listening requires paying close attention, concentrating, and trying to understand what the message means.</td>
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**Modeling Good Listening Skills**

- **Listen for main ideas:** These are the most important points your patients and their caregivers want to share with you. They may be mentioned at the start or end of a conversation and repeated a number of times. Pay special attention to statements that begin with phrases such as “My point is...” or “The thing to remember is...”

- **Paraphrase:** This is a technique that allows the individual to feel heard in their sharing, which in turn allows for continued trust and sharing. Paraphrasing involves restating what you have heard someone say, but in a shortened manner. Always clarify if the person accepts or rejects the summary. You can use expressions like, “It sounds like... is that true?”; “What I hear you saying is...”; “I hear you sharing that you felt scared and alone during that time...is that right?”

- **Questioning:** Open-ended questions to provide an opportunity to share more details. Open-ended questioning help someone begin sharing their story. Examples of open-ended questions include: “How are you managing right now with all that you are going through?” or “What can I support you with right now?”

**Providing Interim Assistance**

- Help patients and their families identify coping strategies while waiting to be referred to additional services.
- Determine which immediate factors are able to be changed. What does the patient/family have control over?
- Respond to and affirm present feelings
- Explore past coping strategies - what has worked in the past in terms of anxiety/stress reduction strategies?
- Take inventory of the ways the patient/family has dealt with past crises
- Help them evaluate past successful coping mechanisms
- Explore all available resources/support systems
- Discuss coping strategies to use later that day if the parent or youth is triggered again
- Make a plan – be ready to discuss next steps