Therapeutic Communication
(Chapter 8 from the required textbook)
PSYCHIATRIC MENTAL HEALTH NURSING: CONCEPTS OF CARE IN EVIDENCE-BASED PRACTICE, 8th Edition
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• The nurse must be aware of the therapeutic or nontherapeutic value of the communication techniques used with the client—they are the “tools” of psychosocial intervention.
• Interpersonal communication is a transaction between the sender and the receiver. Both persons participate simultaneously.

• In the transactional model, both participants perceive each other, listen to each other, and simultaneously engage in the process of creating meaning in a relationship.
• Both sender and receiver bring certain preexisting conditions to the exchange that influence both the intended message and the way in which it is interpreted.

  – **Values, attitudes, and beliefs.** Example: Attitudes of prejudice are expressed through negative stereotyping.

  – **Culture or religion.** Cultural mores, norms, ideas, and customs provide the basis for ways of thinking.
The Impact of Preexisting Conditions (cont.)

– **Social status.** High-status persons often convey their high-power position with gestures of hands on hips, power dressing, greater height, and more distance when communicating with individuals considered to be of lower social status.

– **Gender.** Masculine and feminine gestures influence messages conveyed in communication with others.
– **Age or developmental level.** Example: The influence of developmental level on communication is especially evident during adolescence, with words such as “cool,” “awesome,” “dude,” and others.
In the technological age, communication by text messaging includes such acronyms as BRB (“be right back”), BFF (“best friends forever”), and MOS (“mom over shoulder”), among others.
The environment in which the transaction takes place. Territoriality, density, and distance are aspects of environment that communicate messages.

- **Territoriality** is the innate tendency to own space.
- **Density** is the number of people within a given environmental space.
- **Distance** is the means by which various cultures use space to communicate.
There are four kinds of distance in interpersonal interactions:

- **Intimate distance** is the closest distance that individuals allow between themselves and others.
- **Personal distance** is the distance for interactions that are personal in nature, such as close conversation with friends.
- **Social distance** is the distance for conversation with strangers or acquaintances.
- **Public distance** is the distance for speaking in public or yelling to someone some distance away.
1. The unit manager needs to meet with a client who is exhibiting escalating hostility. Which would be the most appropriate location for the nurse to meet with this client?

A. The client’s room with the door shut
B. A quiet corner of the day room
C. The nurse’s station
D. The unit’s treatment room
The Impact of Preexisting Conditions (cont.)

- Correct answer: B
  - A quiet corner of the day room provides for some privacy in a neutral space while not limiting access to help if safety issues arise.
Components of Nonverbal Communication

- Physical appearance and dress
- Body movement and posture
- Touch
- Facial expressions
- Eye behavior
- Vocal cues or paralanguage
Therapeutic Communication Techniques

- **Using silence** allows the client to take control of the discussion, if he or she so desires.
- **Accepting** conveys positive regard.
- **Giving recognition** is acknowledging, indicating awareness.
- **Offering self** is making oneself available.
- **Giving broad openings** allows the client to select the topic.
• **Offering general leads** encourages the client to continue.

• **Placing the event in time or sequence** clarifies the relationship of events in time.

• **Making observations** is verbalizing what is observed or perceived.

• **Encouraging description of perceptions** is asking client to verbalize what is being perceived.
• **Encouraging comparison** asks the client to compare similarities and differences in ideas, experiences, or interpersonal relationships.

• **Restating** lets the client know whether an expressed statement has or has not been understood.

• **Reflecting** directs questions or feelings back to client so that they may be recognized and accepted.
• **Focusing** is taking notice of a single idea or even a single word.

• **Exploring** is delving further into a subject, idea, experience, or relationship.

• **Seeking clarification and validation** strives to explain what is vague and searches for mutual understanding.

• **Presenting reality** clarifies misconceptions that the client may be expressing.
• **Voicing doubt** expresses uncertainty as to the reality of client’s perception.

• **Verbalizing the implied** is putting into words what client has only implied.

• **Attempting to translate words into feelings** is putting into words the feelings the client has expressed only indirectly.

• **Formulating a plan of action** strives to prevent anger or anxiety from escalating to an unmanageable level the next time the stressor occurs.
2. As the move-out date to leave the shelter gets closer, a battered wife states, “I'm afraid to leave here. I'm afraid for my safety and the safety of my children.” Which nursing statement is most supportive?

A. “This is a difficult transition. Let's formulate a plan to keep you all safe in the community.”
B. “It’s the policy that clients can only live here 30 days. Maybe we can ask for more time.”
C. “You've had a month to come up with a plan for keeping you and your family safe.”
D. “Hopefully, your husband has been in counseling. I’m sure this will work out fine.”
• Correct answer: A
  – The nurse is using the therapeutic techniques of “reflection” and “formulating a plan of action.” The use of these communication facilitators indicates that the nurse is supportive of the client’s feelings and appreciates the need for a safety plan.
• **Giving reassurance** may discourage client from further expression of feelings if client believes the feelings will only be belittled.

• **Rejecting** is refusing to consider client’s ideas or behavior.

• **Giving approval or disapproval** implies that the nurse has the right to pass judgment on the “goodness” or “badness” of client’s behavior.
Agreeing/disagreeing implies that the nurse has the right to pass judgment on whether client’s ideas or opinions are “right” or “wrong.”

Giving advice implies that the nurse knows what is best for the client and that the client is incapable of any self-direction.

Probing is pushing for answers to issues the client does not wish to discuss and causes the client to feel used and valued only for what is shared with the nurse.
• **Defending** means to defend what the client has criticized implying that the client has no right to express ideas, opinions, or feelings.

• **Requesting an explanation.** Asking “Why?” implies that the client must defend his or her behavior or feelings.

• **Indicating the existence of an external source of power** encourages the client to project blame for his or her thoughts or behaviors on others.
• **Belittling feelings expressed** causes the client to feel insignificant or unimportant.

• **Making stereotyped comments, clichés, and trite expressions** are meaningless in a nurse-client relationship.

• **Using denial** blocks discussion with the client and avoids helping him or her identify and explore areas of difficulty.
• **Interpreting** results is the therapist’s telling the client the meaning of his or her experience.

• **Introducing an unrelated topic** causes the nurse to take over the direction of the discussion.
3. The nurse is performing an initial assessment on a newly admitted client who is oriented times four. Which of the following communication techniques would best facilitate obtaining accurate and complete client data?

A. Closed-ended questions
B. Requesting an explanation
C. Open-ended questions
D. Interpreting
• Correct answer: C

– Open-ended questions are phrased in a way that gathers as much information as possible. By the use of phrases such as “Tell me about” or “Describe to me” a varied and rich body of information can be assessed.
Active Listening

- To listen actively is to be attentive to what the client is saying, both verbally and nonverbally.
- Several nonverbal behaviors have been designed as facilitative skills for attentive listening.
Active Listening (cont.)

• **S** – Sit squarely facing the client.
• **O** – Observe an open posture.
• **L** – Lean forward toward the client.
• **E** – Establish eye contact.
• **R** – Relax.
Process Recordings

- Process recordings are written reports of verbal interactions with clients.
- They are written by the nurse or student as a tool for improving communication techniques.
Feedback is useful when it:

- Is descriptive rather than evaluative and focuses on the behavior rather than on the client
- Is specific rather than general
- Is directed toward behavior that the client has the capacity to modify
- Imparts information rather than offers advice
- Is well timed