

Webinar 2 Handout: Communication Skills

Your ability to communicate is essential to health behaviour change. Communication enables health professionals to engage quickly and effectively, allows clients to discover their motivation for change and supports the process of sustained change.

At its basic level communication is an exchange of information. In a health coaching scenario, the information exchanged can sometimes be deeply hidden or buried within the client's thinking and behaviours. Therefore, health professionals require skill and sensitivity in the way they communicate to bring the information out of their client and reflect it back to them in a way that supports the client to move forward.

Becoming a brilliant communicator takes presence, patience and practice. You need to be committed to developing your communication skills in an on-going way.

The essentials for mastering communicating are:

- ✓ Create a safe space by ensuring confidentiality – for a client to speak openly they need to feel safe
- ✓ Ask the right questions – great questions lead to great information, insights that can inform and inspire change
- ✓ Always value the information you're given and acknowledge the courage it takes to be coached and to make change, be encouraging and supportive in what you say
- ✓ Communicate with your whole self – your body language and eye contact, tone of voice, every aspect counts
- ✓ Remember not to position yourself as an expert so don't use jargon, speak in clear and simple ways that your client can relate to.
- ✓ Be genuinely curious in your client, be empathetic, non-judgemental
- ✓ Be respectful that your client's life and experiences are their own, and provide space for your client to create their own solutions for change

Responding to Clients - Communication Roadblocks

Crucial in active listening is what the health professional says in response to the client. Thomas Gordon (who coined the term active listening) described 12 roadblocks – responses that get in the way of self-exploration, derail a person, and are self-centered rather than client centered. The underlying message seems to be listen to me, I know best.

1. Ordering, directing, or commanding
“Don't say that”
2. Warning, cautioning, or threatening
“If you don't start looking after yourself you'll get diabetes”
3. Moralising, telling people what they should do
“You really ought to..” “What you should do is..”
4. Advising, making suggestions, providing solutions



"Why don't you..." "Have you tried..."

5. Persuading with logic or lecturing
"That facts are..." "Let's think this through" "You know how many times I've heard that excuse..."
6. Criticising, judging, blaming
"Surely there is more to life than to drinking alcohol" "Ultimately you got yourself into this situation"
7. Praising, approving
"That's how I would feel if I was you" "You are right!"
8. Labelling, shaming, ridiculing
"that's a silly way to think" "How you could do that?"
9. Analysing
"Do you know what the real problem is?"
10. Sympathising or consoling
"Everything will turn out fine" "It's ok, it's not that bad"
11. Probing questioning
"Why would you do that?"
12. Avoiding, distracting, withdrawing, changing the subject
"Look on the bright side, things could be worse!" "You think you have problems, let me tell you about..."

Rethinking how we Respond

There are 4 essential skills that you use in your coaching practice to build solid communication foundations.

These skills can be remembered by the acronym OARS:

O pen-ended questioning

A ffirming

R eflexing

S ummarising

Open-Ended Effective Questions

Open-Ended effective questions evoke clarity, action, discovery, insight, or commitment.

They create greater possibility, new learning or clearer vision. Open-ended questions, unlike closed questions, do not elicit a yes or no response. Instead they encourage a client to explore their stories.

Questions such as these are derived from holding the client's agenda, and either forward the client's action or deepen their learning:

"What do you want?"

"What's next?"

"How will you start?"



“What does that cost you?”

“What’s important for you to remember?”

What and how are often the best ways to begin open-ended questions, as ‘why’ questions may evoke resistance as they suggest judgement. For example, ‘why can’t you find time to exercise?’

A more effective use of ‘why’ would be “Why did you decide to see a coach?” or “Why is your well-being vision important to you?”

Effective open questions for your toolbox:

- What is important to you?
- In what ways is ... important to you?
- What would you like to be able to do?
- What do you value in your life?
- What would your life look like once you’ve achieved your goals?
- What would it feel like to engage in _____?
- What are the possibilities?
- What next? What else?
- What strategies could work?
- What would easy look like?
- How does _____ look to you?
- What does a content life look like?
- What is the dream you are postponing?
- What is your purpose?
- What is your vision?
- What does light feel like?
- What truly motivates you?
- What excites you?
- What triggers get in the way?
- How could you decrease or deal with these triggers?
- What is your greatest challenge?
- What is that costing you?
- What barriers are in the way? How can you remove them?
- What have you learnt from the past?
- What have you learnt that you could draw upon now?
- What would it take to be ready to change?
- What have you tried and succeeded to accomplish in your life that is similar to this goal?
- What is the one thing you have postponed changing about yourself?
- What specific mental, physical, emotional, and spiritual activities do you engage in to keep yourself operating at an optimal level?
- What “story” do you consistently tell yourself?
- How well is your current job meeting your need for meaningful, challenging, engaging work?

- What three qualities/strengths do you appreciate most about yourself?
- How are you complicit in the situation you don't want to be in?
- What are you scared of?
- What feels meaningful?
- What gives you purpose?
- What makes you feel you belong?
- If you accepted yourself as you are, how would you feel?
- What makes you feel truly alive?
- What are some new possibilities that you haven't considered before?
- In the next week, what could you think about or do that would move you forward?

Reflections

Perceptive reflections are another form of listening, and ideally, we should aim to use reflections more than questions. Reflections are an essential skill in your communication toolbox because they allow a shared understanding without needing to ask a question, and they show your client that you are truly hearing what they say.

Reflecting what your client says can help your client to reflect upon what they have said, clarify any misrepresentations and continue the conversation forward, often diving deeper into a subject.

It is a mechanism by which you can express interest, empathy and understanding and add depth to the feelings and thoughts they have expressed. Reflections are also a useful tool to help clients hear their own arguments for change as you selectively repeat these back to them.

The objective behind reflecting is to highlight change talk (reasons for changing) and identify ambivalence. Reflecting the negative can sometimes result in the client becoming stuck in all the reasons why change is too hard.

Types of reflections

There are different types of reflections that can be used to elicit different meanings and responses:

- **Simple reflection:** This is when we repeat or slightly rephrase what we hear the client say. It communicates interest and lets the client know you are listening and can help move the conversation forward
- **Complex reflection-** extends beyond what the client has actually said, incorporating feelings, hunches, picking up what has been implied. The coach reads between the lines and might add an empathetic statement. For example, you may be able to tell what a client is feeling (from verbal or non-verbal cues) and give him or her words for those feelings. It may also be useful if they are saying one thing but their body language seems to be contradicting their words
- **Double sided** – this is a way to reflect your client's ambivalence and be helpful to demonstrate you understand there are both positives and negatives to change and staying the same. Done well, this can help the client move forward by providing their own arguments for change.

- **Metaphors** - can highlight different perspectives
- **Amplified** – adds intensity to the statement. This is typically used when a client is expressing a lot of ‘sustain talk’ (reasons for why they can’t change). By intensifying their statement in a reflection, ‘ie. There is nothing you can do to be healthy’ it can lead the client to instead present some arguments for why they could change.

Activity: Practicing reflections

Find a partner. Ask them to talk to you for around 5 mins about something that really interests them or that they are passionate about. You are not allowed to ask them any questions! Instead, practice reflecting what you hear them say and notice how it impacts the conversation. Try using the different types of reflections!

Affirmations

Affirmations are a specific type of reflection. They are positive statements that selectively reflect a client’s strengths, values, acknowledge what your client does well or the effort your client is making as they work towards their goal.

Benefits of affirmation include empowering the client to believe in themselves and internalise positive attributes, boosts self-confidence, encourages persistence, and creates an atmosphere of positivity.

Affirmations can strengthen the relationship between the health coach and the client, as people are more likely to spend time with, trust, listen to and be open with people who recognise and affirm their strengths.

Finding the silver lining

Finding things to affirm your clients for is easy when things are going well however this can be more challenging but even more needed when your clients are not doing so well! Clients may be focussed on the negatives, all the things that have failed or gone wrong, however the coach can positively reframe the focus, finding a strength or a learning, or acknowledging the effort a client has made. It’s like searching for the silver lining in the cloud.

Motivational Interviewing (MI) – A Keystone of Health Coaching Practice

MI is a collaborative, goal-orientated style of communication with an emphasis on highlighting the language of change. It is useful for clients who are ambivalent about change i.e those who are in the pre-contemplation, contemplation and preparation stages of change.

The MI approach originated from Dr William R. Miller’s intuitive practice in the treatment of problem drinkers. Dr Miller then further developed MI with Stephen Rollnick and its role in changing behaviour has been recognised in many areas beyond substance use disorders

including health care, eating disorders, and mental health. There are now more than 25 000 articles citing MI and over 300 published studies in peer reviewed journals.

The primary goal of Motivational Interviewing is to create a conversation around change. It is a guiding style that helps people talk themselves into changing.

- MI doesn't try to convince or argue with people
- It encourages clients to examine their own ideas and thoughts
- MI invites people to examine their own values and behaviours and come up with their own reasons to change.
- It draws out people's hopes, experience, and wisdom about themselves including whether or not to change.

The Spirit of MI

The spirit of MI is a guide to the way a health coach should be with a client. The right approach, attitude and behaviours are fundamental to developing a collaborative relationship based on trust, respect, understanding and acceptance. The underlying principles of MI are the same as those already discussed as underpinning your coaching practice, making MI a great foundation for the coaching relationship.

The first of the four aspects of the spirit of MI is that it involves **partnership** - an equal relationship where the health professional and client solve problems together. The client is viewed as not a passive recipient of information but respected as an expert on themselves.

"Your purpose is to understand the life before you, to see the world through this person's eyes rather than superimposing your own vision." (Miller & Rollnick 2013)

Related to the spirit of partnership is an attitude of **acceptance**. There are four aspects to acceptance.

1. Absolute worth – prizing the inherent worth and potential of every human being. This is the opposite attitude to judgement.
2. Accurate empathy, an active interest in, and effort to understand the other's perspective.
3. Honouring and respecting a person's autonomy and their right and capacity for self- direction.
4. Affirmation, to seek and acknowledge a person's strengths and efforts.

The third aspect of the spirit of MI is **compassion**. This refers to the health coach putting the client's welfare first and giving priority to their concerns. The opposite approach would be to try to evoke a decision by a person that is not in his or her best interests but is the interest of the health professional.

"To work with a spirit of compassion is to have your heart in the right place so that the trust you engender will be deserved" (Miller & Rollnick 2013)

The fourth aspect of the spirit of MI is **Evocation**. This is a strengths-focused premise that people already have within them what is needed to change and the health professional's task is to evoke it. The assumption is that people have the wisdom, motivation and

resources within themselves that can be called upon. No matter what reasons the health professional might offer, lasting change is more likely to occur when the client discovers their own reasons and determination to change.

The principles of MI

There are four key principles that can be remembered by the acronym RULE (Resist, Understand, Listen and Empower).

1. To resist the righting reflex
2. To understand and explore the client's motivation
3. To listen with empathy
4. To empower the client

Resist the righting reflex

Health professionals often have a powerful desire to set things right, to heal, to prevent harm and promote wellbeing. When they see someone headed down the wrong path, they will usually want to get out in front of the person and say, "Stop! Turn back! There is a better way!"

The problem is, that this can have the opposite effect. It is human nature to resist persuasion and thus take up the other side of the argument. When a health coach takes up the good side of a person's argument and tries to set the client right, a client's natural response is to argue the other side of the ambivalence.

A well-documented principle of human nature is that we tend to believe what we hear ourselves say. Hence the more the client verbalises the disadvantages of change the more committed they become to maintaining the status quo.

The Righting Reflex in Action:

Health Coach: Well if you did decide to change your eating habits, that would help you to lose weight, improve your mood, and give you more energy. Healthy eating is very important.

Client: Yes, I know all that. But I can't help but think it will take a lot of effort to change my eating habits and I'm not sure eating bland salads is that appealing.

Understand and explore the client's motivation

It is the client's own reasons for change, not a health coaches, that are most likely to trigger behaviour change. By the client exploring their own perceptions about their current situation, concerns, values and motivations they are more likely to voice their own arguments for change- their change talk.

Listen with empathy

Motivational interviewing involves skilled use of active listening skills. With personal behaviour change the answers most likely lie within the client and finding them requires empathetic listening.

Empower the client

Empowering is about helping clients explore how they can make a difference in their own health. Clients know best how they can successfully build change into their daily lives, and being active in the consultation means they are more likely to take action afterwards. This incorporates our health coaching principle of treating the client as the expert in their life.

Ambivalence

‘I know I should... but..’ ‘I could, but...’ ‘I want to, but....’

Your health coaching clients in pre-contemplation, contemplation and preparation stages of change will be dealing with ambivalence i.e. thinking about changing their behaviour but not sure if they want to change.

It is normal for people to be unsure of making changes as the decision to change often involves weighing up whether the perceived benefits of the new behaviour are worth the effort of trying to make the change, as well as questioning their capabilities to make the change.

If you take the traditional approach of convincing or persuading the client to change, the client is likely to come up with all the reasons they can't change! This usually results in the client remaining stuck and unable to move forward. Instead, by taking an interested approach and carefully guiding the client to explore their decision it is much more likely they will decide to change and that change will be durable.

MI focusses on listening for the change talk, their arguments for change, and then strategically reflecting or presenting it back to them so they hear it in their own words. Your client will also have reasons why they can't or don't want to change. These arguments to stay the same are called sustain talk.

Sustain Talk vs Change Talk

When people are in two minds about changing, they will give reasons for change and reasons for staying the same. Change talk refers to statements made by the client that point towards a willingness to change. Sustain talk is the opposite to change talk – it is the person's arguments against change or support for staying the same. You can identify how ready someone is to change by noticing the amount of change talk and the type of change talk they express.

Your coaching ears need to be listening for the change talk, their arguments for change, and then strategically reflecting or presenting it back to them so they hear it in their own words. This moves the conversation forward, guiding the client towards change.

Change talk might sound like this:

- I really need to stop smoking
- My alcohol intake has crept up too much lately
- I'd like to be eating healthier
- I can't go on like this
- I'd enjoy getting back to the gym

- I want to be around for my grandkids

It's important to note that sustain talk is also important. It helps us understand why the client feels that change is hard and highlights barriers. Exploring this with them allows you to understand where they are coming from. The client may also see the payoff they get from not changing, and that can be an a-ha moment. For example, a mother who smokes because it's the only me-time she gets, or someone who has started drinking because they don't want to feel the pain of a breakup.

Sustain talk might sound like this:

- I love having a few beers at the end of the day
- I've tried, and I don't think I can control my eating
- I don't have time to exercise
- I need to relax with wine at the end of the day
- I just need to accept that I will never get a good night's sleep
- I've had it with trying to change my eating habits!
- I'm just not ready to consider changing my diet

Your role as a coach is not to refute their reasons for staying the same but to listen and understand them and help your client see how staying the same might not align with their greater vision they have for their life.

A watch out for a coach is the temptation to tell your client why they should change or presenting your arguments for change. This will almost certainly invoke some resistance. No-one likes being told what to do! You may also cause your client to start arguing against you and reasons to change, talking themselves out of changing behaviour, this is not what you want.

When you hear sustain talk the best way to help a client move towards change is to sit with the ambivalence. There are some positive strategies you can use which include affirmation, reflection, reframing their statement and/or emphasis the client's autonomy – it is always their decision whether to change or stay the same.

Evoking Change Talk

There are questions you can ask your clients that will help to evoke change talk and propel the conversation forward towards change.

D: Why have you been thinking about changing your _____? (reveals desire)

A: If you were to change your _____ how would you do it? (evokes ability/confidence)

R: What are you most important reasons for wanting to change? (evokes reasons)

N: How would things be different (better) if you decided to change? (reveals need/importance) OR

C: What is the next step? On a scale of 0-10 how willing are you to make this change? (encourages commitment)

Activity:

Think of something you have been thinking about changing - it can be about health or could be something unrelated.

Can you identify the ambivalence i.e your reasons for and against change?

1. Argument for change:

2. Argument to stay the same: