

Effective Communication



SELF-STUDY MODULE FOR WIC CPAs

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ORIENTATION/RATIONALE

Effectively communicating with clients is a skill that is essential to your job as a healthcare provider. Hopefully, most of us realize and appreciate the importance of good, effective communications. To send and receive clear and consistent messages will facilitate the interaction that is necessary between the client and healthcare provider.

OBJECTIVES

After completing this module, the WIC CPA will be able to:

1. Discuss the role of communication in all human interactions.
2. Define common barriers to effective communication and identify strategies to overcome.
3. List ways to communicate effectively nonverbally.



PRE-ASSESSMENT

This pre-assessment is designed to determine if you have already mastered the content of this module. After you have completed the pre-assessment, refer to the “Pre-Assessment Answer Key,” (see page 24-25). Evaluate your strengths and weaknesses to determine the specific areas of competency you need to develop. Refer to the Objectives and list of Learning Activities to determine which activities you need to complete for this purpose.

Directions: Check the more appropriate response for each of the following items.

1. T___ F___ Effective communication should be more expressive than receptive.
2. T___ F___ Your listening style refers to how you listen and respond and may vary with circumstances.
3. T___ F___ The listener who can reflect back both the feeling and content of the message is referred to as an active listener.
4. T___ F___ Of the time we spend communicating, approximately 30% is spent speaking.
5. T___ F___ Questioning, both open and closed, is effective if used appropriately in the right situation, at the right time.
6. T___ F___ There is a high correlation between poverty levels and levels of literacy.
7. T___ F___ Over the past few years, the number of Hispanic WIC participants has decreased, while the percentage of black and white participants has risen.
8. T___ F___ Communication in written form may be made more effective by using fewer words, shorter sentences, and shorter paragraphs.
9. T___ F___ During interpersonal communication, most of the message is transmitted verbally.
10. T___ F___ Body language is open to misinterpretation, just as is verbal communication.
11. T___ F___ The “self-fulfilling prophecy” concept is primarily controlled by the CPA.

LEARNING ACTIVITIES

“The most important thing in communication is to hear what isn’t being said.” – Peter Drucker

“Communication is exhausting and small talk is boring. Isn’t there anything in between?”

“The Better Half” – Glasbergen

Introduction

Many of us may not realize the importance of communicating in our day-to-day job. However, communication skills are at the core of our interactions with WIC clients and others.

It is estimated that we spend almost 70% of our day in communicating – listening, speaking, reading, and writing. Whether interpersonal, intergroup, intragroup, intra-organizational, or externally, communication becomes an essential skill. How well or how poorly we communicate may determine how successful we are in accomplishing our task. In this module, you will review the broad field of interactive communications and explore many of the skills required to facilitate effective communication.

Scope and Role of Communication

To define communication is a difficult task. To illustrate, try writing, in a few sentences, your definition of the term.....you probably found that you had some difficulty putting your definition in words, and if it were possible to compare to others you would probably find great disparity in your definition and the definition of others. So maybe it is better if we do not concern ourselves with defining the term, but rather,

review some of the things that we know about communicating.

- “Seek first to understand, then to be understood” (Covey, 1990).
- We sometimes tend to give quick solutions rather than hear what the client is really trying to tell us.
- To listen effectively requires a good deal of effort.
- Nonverbal communication may tell us more than verbal.
- To effectively communicate with people of different cultures may be especially challenging.
- Questioning may be an excellent way to begin communication.
- Focus on feelings rather than on content. (<http://www.coping.org/communi/model.htm>)
- What do you need to know about your clients? As much as possible.
- Communication is both a receptive and an expressive process.
- Communication is a very complex process, with many opportunities for error.

Communication Skills

“It seems rather incongruous that in a society of supersophisticated communication, we often suffer from a shortage of listeners.” – Erma Bombeck

(Much of the following information is adapted from Active Listening ,n.d., Learning Modules For Adult Educators, Texas A & M University).

Listening

One of the most important things that a person in a helping profession can do is to listen properly – to listen for the feeling that the person is expressing and the content. Of the time spent communicating 40% is (or should be) spent listening.

Remember the first time you heard a recording of your own voice? Chances are you said, “Do I sound like that?” Most of us are shocked to realize that our voices sound differently to others than they do to ourselves.



So it is with our listening styles – we are usually surprised when we analyze our manner of listening and responding to those who speak to us. We develop habits of listening and responding. But have you wondered how they sound to others? Your listening and response habit, or style, may vary with circumstances, but you will probably find that it often falls into one or more of the categories that will follow.

When you struggle to listen and make a powerful effort to understand where the other person is coming from, the person with whom you are talking is going to be very grateful and relieved. That person will get a clearer understanding of the forces in action and thus, hopefully, will be able to take some positive action. Your active listening will be helping the other person gain a measure of control over what happens in her life. To feel that she can control what happens to her is an important step to improving self-concept and quality of life.

ACTIVITY

Here is a chance to sample your style before you review the categories. Imagine that you are in a session with a client and the client makes one of these statements. Write down your response to each of the following:

1. “If I try to take the baby’s (18 month old) bottle away he gets really fussy. My husband can’t stand the fussiness, so I give the baby his bottle.”

(Response) _____

2. "My kids will not eat what I prepare for supper. They will throw fits until I make them what they want to eat."

(Response) _____

3. "I've tried breastfeeding now for a week. I am tired of having to wake up and feed the baby. I want to switch to formula."

(Response) _____

Now, review the following and see if you can locate your listening style. For each statement, check the answer that most nearly matches yours.

LISTENING STYLES

The Boss – The Boss indicates her way is the only right way.

1. "I told you last time if you don't get that baby off the bottle his teeth will rot out. It doesn't hurt for a baby to fuss a little."
2. "If you would lay down the law like I told you to do, those kids would either eat what you prepare or nothing."
3. "Breastfeeding is best for your baby. Do not start formula."

The Put-Downer – Sarcasm tells the speaker that her feelings are not important.

Commonly called "Put Downs."

1. "What? Is your husband not man enough to handle it?" or "So, the man has control of the household, huh?"
2. "What's the matter, are you scared your kids will starve?"

3. "Breastfeeding is easy, why would you want to formula feed?"

The Analyst – Knows what the problem really is; but, of course, you don't.

1. "You're an enabler. You are allowing your husband to run your life."
2. "Your kids sound spoiled – like most kids today. They get what they want when they want."
3. "You must not have taken a breastfeeding class."

The One-Upper – The responder says your situation is not that important and tops your story with one of her own.

1. "You think that is bad. I once had a client that the baby would not stop crying no matter what was done. None of the family ever slept!"
2. "You think that is bad. I once had a client whose child threw such a fit at daycare over meals that they were asked to leave the daycare."
3. "I have a friend that nursed twins and didn't get more than 3 hours of sleep a day for the first month. She ended up breastfeeding them for 18 months."

The Discounter – Lets you know your feelings don't count.

1. "You'll make it through this somehow. There will be something down the road that will make this seem so little."
2. "Don't let them bother you; you will soon get to the point where you won't even hear them."

3. "You need to keep breastfeeding. You soon start to adjust to the lack of sleep."

The Cross Examiner – Fires questions, not to help the speaker see the situation more clearly, but to "pin" some blame on the speaker.



1. "Haven't you tried something else besides the bottle to calm his fussiness?"
2. "What are they upset about? What do you try to feed them for supper?"
3. "Why haven't you slept? Don't you have someone helping you with the baby between feedings?"

The Advice Giver – Has an answer to everything. Advice Givers use lots of "shoulds" and "oughts" along with trite statements.

1. "You should talk to your husband and tell him that the baby could have baby bottle tooth decay if the baby is not weaned from the bottle."
2. "You should set the rules and follow through with them. That is a good parenting skill."

3. "Feed the baby while you are sleeping. That's the beauty of breastfeeding."

Did your responses fit into any of the above categories? If not, perhaps you are an active listener.

THE ACTIVE LISTENER

You are an active listener if you reflect back to the speaker the feeling and content of the message. Along with the feeling and content of the message, the active listener gives the speaker attention, interest, and acceptance. These are expressed by nonverbal and verbal language. The active listener is not critical of the speaker, but tries to see the world through the eyes of the speaker and to grasp the feelings that the speaker feels. However, the active listener does not assume the problem of the speaker; rather, she allows the speaker to talk through the problem. Here is how the active listener might have responded to the three statements.

1. "If I try to take the baby's (18 month old) bottle away he gets really fussy. My husband can't stand the fussiness, so I give the baby his bottle."

(AL Response). "It sounds as if you are in a hard spot. Your husband gets frustrated over the baby's fussiness, and you feel the best way to solve the problem is to give the baby a bottle."

2. "My kids will not eat what I prepare for supper. They will throw fits until I make them what they want to eat."

(AL Response). You are frustrated that you work hard to provide them a meal and then they are unappreciative and throw fits. You are unsure of how to handle them wanting something else to eat.”

3. “I’ve tried breastfeeding now for a week. I am tired of having to wake up and feed the baby. I want to switch to formula.”

(AL Response). “You are a mother of a newborn baby and are tired. You think switching to formula will help with this tiredness.”

Active listening tells the speaker that you are sensitive to her feelings as a person, that you are sincerely involved, you care about what she is saying, and you are making a “mighty effort” to understand how she sees the world. You are listening with intent, which is shown, by your body language as well as your response.

Speaking

Of the time we spend communicating, approximately 30% is spent speaking. Interpersonal communication, whether in a group setting or in a two-person exchange, involves some very complex dynamics. Communicating is the sending of a message from one person to another who responds according to how she perceives the message.

Often acceptance or belief in the individual is needed most when it is hardest to give. Three characteristic attitudes and behaviors are basic to communicating acceptance to the WIC client.

1. **Be open.** Receive people as they are.
2. **Be nonjudgmental.** The CPA must not pass judgment.
3. **Be supportive.** Let the client know that you have confidence in her as a human being capable of solving her own problems.

(The following information is adapted from Tools for Communication, Messina and Messina, Coping org.)

The following eight response types for healthy communication are listed in the order of most effective to least effective

1. **Understanding:** An understanding response conveys to the client that you are empathetic and it may build positive feelings that will facilitate further dialog.

Examples: “You’re offended and angry.”

“You’re feeling discouraged and wonder what’s the use.”

Responses such as the above will convey a feeling of understanding and empathy that helps to build a positive relationship between the CPA and the client.

2. **Clarification:** To clarify is to convey to the other that what they are saying is important and that you want to fully comprehend.

Example: “If I understand correctly, you would like to have peaceful family meals where everyone eats the meal you prepared.”

A clarifying response may reduce hostility, and it may encourage the client to explain more fully. A strategy is to follow a clarifying statement with silence to allow the client to gather her thoughts before further response.

- 3. Self-disclosure:** Self-disclosure will give the client some insight into who you are, and that you have an understanding of where they are coming from.

Examples: "I remember how tired I was the first week of nursing my baby. It is a hard time."

"I know how frustrating it is to work hard for your children and they seem to not be satisfied."

Such responses allow you to connect with the other person. However, overuse of self-disclosure responses may tend to focus attention on the wrong person.

4. Questioning:

Questioning seeks to elicit more information. Open questions promote communication, while closed questions focus on specific facts or aspects.

Examples: "Could you discuss with your husband the need to wean the baby from the bottle?" (Closed: may be answered with yes or no response)

"Can you think of other ways to calm your baby besides the bottle?" (Closed)



"What would you like for your meal time to look like? What are some steps you will have to take to move towards that desire?" (Open: this will promote more communication)

"What were your original desires for nursing your baby?" (Open)

Both open and closed questioning is effective if used appropriately in the right situation at the right time.

- 5. Information Giving:** Giving specific information involves relating facts in an objective manner with a minimum of judgment or evaluation. This may be a very important strategy to the CPA. What becomes important is to give the information in such a way as to maximize its reception and use.

Examples: "Other women who have been in similar situations have worked really hard to give the bottle when their husbands are not there to hear the baby fuss. They have also placed water in the bottle instead of milk and found sippy cups that their children would take."

"Other families who have gone through this have tried some of these things to bring about more of a peaceful meal time. First, a family meeting to discuss what you expect from them and also to listen to their desires for meals lets the kids see that you care about them."

"Here are some suggestions for improving your child's diet."

“Most women will tell you that breastfeeding is hard at the beginning, but it ends up being well-worth it. You have made it through the hardest week. Some specific things you can do now are take advantage of your mother’s offer to help and let your baby empty out the first breast before switching to the second breast.”

- 6. Reassurance:** All of us need “a pat on the back”, and positive feedback that we are doing some things right. Seek out opportunities to give such feedback to clients. However, a word of caution. We must do this in such a way as to not be condescending or that discounts the person’s problem.



Example: “You will manage.” This is not a reassuring response. “You have handled this situation before. Relax and use your best judgment. Do what is right for you. I have confidence in you.” This is a reassuring response.

By following some of the suggestions both in the Listening section and the current Speaking section, will increase the chances that the information that you give will be acted upon.

ACTIVITY

For the following client statements, select an appropriate response, and determine the response category (Understanding; Clarification; Self-disclosure; Questioning; Information Giving; Reassurance) in which it falls.

- a. “The kids and I live with my mother and brother. My brother eats a lot of our WIC food.”

- b. “I don’t have any way to get to the WIC appointments now that my car is broken down.”

- c. “My kids don’t like any kind of vegetable.”

- d. “My baby will not drink milk now that he has been weaned from the bottle.”

- e. “My child is a picky eater. All he will eat is peanut butter and jelly and chips.”



Reading

The Problem: According to the 1992 National Adult Literacy Survey (NALS) between 21 and 23 percent of the adult population in the U.S., or approximately 44 million people scored in Level 1. Another 25-28 percent of the adult population, or between 45 and 50 million people scored in Level 2. Adults in Level 1 can read a little but not well enough to fill out an application, read a food label, or read a simple story to a child. Adults in Level 2 usually can perform more complex tasks such as comparing, contrasting, or integrating pieces of information, but usually not higher-level reading and problem-solving skills.

Twenty-five percent of adults in Level 1 were immigrants who may have just been learning to speak English (National Institute for Literacy). In the 2002 report of the USDA Food and Nutrition Service, it was reported that Hispanics made up the largest group of

WIC participants (38.1 percent). The number of Hispanic WIC participants has risen, while percentages of black and white participants have decreased.

There is a high correlation between poverty levels and levels of literacy. The USDA reported that in 2002 the poverty level of WIC enrollees remained substantially unchanged, with almost two thirds reporting household income at or below the poverty line. Among WIC participants reporting some income, the average annualized family income in April 2002 was \$14,550.

Given the above facts, it may be assumed that a significant portion of WIC enrollees will have low levels of literacy skills (difficulty in reading). We cannot assume that pamphlets, brochures, booklets, correspondence, etc. may be easily read and comprehended if the reading level of the written materials is above the reading ability of the WIC participant.

Reading Levels: If you are interested in finding more about the reading levels of clients with which you work, the following item will allow you to do a quick check. Remember that a satisfactory rapport should be established with the client before attempting this exercise. If it is not, it may appear very offensive for the client. The exercise should be used only if you suspect that lack of reading skills may be a barrier to accomplishing your work with the client.

WORD LIST

List One (have the client try to read the following list of words)

safe	ocean
against	bench
smash	damp
reward	timid
evening	perform
stream	destroy
empty	delicious
stone	hunger
grove	excuse
desire	understood

If the person had difficulty reading this list, she has very limited reading skills.

List Two (have the client try to read the following list of words)

installed	spectacular
importance	inventory
medicine	yearning
rebellion	imaginary
infected	consequently
responsible	excellence
liquid	dungeon
tremendous	detained
customary	abundant
malicious	compliments

If the person can read most of the words in this list easily, she is reading at about the sixth grade level.

List Three (have the client read the following list of words)

prairies	articulate
evident	deprecate
nucleus	remarkably
antique	contrasting
twilight	irrelevance
memorandum	supplement
whimsical	inducement
proportional	nonchalant
intangible	exuberant
formulated	grotesque

If the person can read most of the words in this list easily, she is reading at about the eighth grade level. (*South Carolina State Dept. Of Education*)

Readability: Readability is the ease with which the message may be read and understood by the average reader. In evaluating materials we must ask these questions:

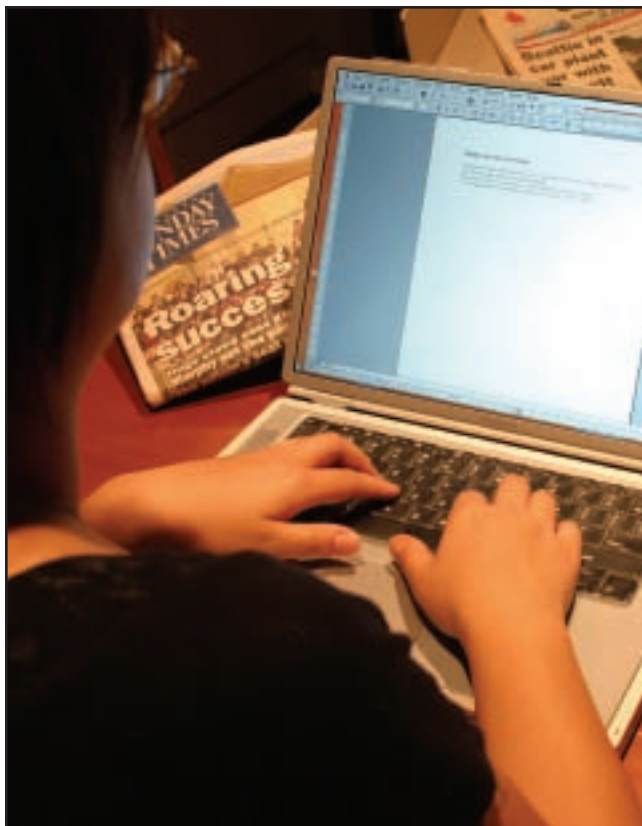
- Who will read the material?
- How well do they read?
- What are their interests?
- What do they need to learn?

To give you some idea about reading material levels, while some articles such as on the editorial page may be at a higher level, it is said that the average newspaper story is written at about the eighth grade level. If the WIC enrollee is provided with materials that exceed her reading and comprehension level, then the material may not accomplish what is intended.

If you are interested in additional information regarding readability and/or readability formulas you can go to the following websites:

<http://csep.psyc.memphis.edu/cohmetrix/readabilityresearch.htm>

<http://www.gopdg.com/plainlanguage/readability.html>



Writing

The nature of your position requires periodic production of written documents. It may be in the form of memos, letters, directions, instructions, announcements, reports, etc. You may facilitate more effective written communication by remembering some basic guidelines.

1. Control your vocabulary.
2. Words should be short and easy (not over three syllables if possible).
3. Many times fewer words are more effective.
4. One idea in each sentence.
5. Short sentences...try to keep your sentences to twelve words or less.
6. Short paragraphs
7. Check your facts, spelling, grammar and punctuation.

One way to check readability of any document that is created in the Microsoft Word program or documents that may be scanned into the program is to do the following:

- On the Tools menu, click Options, and click the Spelling & Grammar tab.
- Select the Show readability statistics check box, and then click OK.
- On the Tools menu, click Spelling and Grammar.
- When Microsoft Word finishes checking spelling and grammar, it displays information about the reading level of the document.

ACTIVITY

Type a brief paragraph, or select a piece of material from a file on your computer and test the Microsoft Word capability.

Nonverbal Communication

“Men are born with two eyes, but only one tongue, in order that they should see twice as much as they say.” – Charles Caleb Colton

*“You can observe a lot just by watching.”
– Yogi Berra*

It has been determined through research, that during interpersonal communication, 7% of the message is verbally communicated, while 93% is nonverbally transmitted. Of the 93%, 38% is through vocal tones while 55% is through facial expressions. As we are educated to prefer words to communicate we often overlook nonverbal signals.

An awareness of nonverbal behavior will allow you to become a better receiver of messages as well as becoming a better sender of messages that reinforce what you are saying.

(The following information is adapted from Tools for Communication, “Nonverbal Communication Issues”, Messina and Messina, Coping.org.)

(<http://www.coping.org/communi/nonverbal.htm>)

You cannot say nothing! Try to sit for one minute without speaking. Even if you are able to keep from moving you will still communicate rigidity, anxiety, or something. We are always saying something. It is important to observe and try to understand what is being communicated. In many situations people say what they think intellectually rather than what they feel emotionally. There is some truth in the old cliché “actions speak louder than words.”

Body language, carefully observed and interpreted, can tell a lot about what others are feeling.

The following are some nonverbal gestures, with an explanation of what they may convey:

Openness, confidence: open hands, palms up; eye contact; smile, leaning forward, relaxed.

Cooperation, readiness: uncrossed legs; welcoming handshake; open arms or hands (palms out); smile; eye contact.

Professional: taking notes; leaning forward; use of space in seating so as to avoid barriers; eye contact.



Indifference, boredom: rhythmic drumming, tapping; legs crossed; glancing at exit; fixed stare; yawning; fidget or rock.

Doubt: eyes closed; brow furrowed; frown; rubbing eyes; pinching bridge of nose.

Suspicion, secretiveness: folded arms; crossed legs; lack of eye contact; hand covering mouth; frown; throat clearing; scratching head.

Need for reassurance: clenched hands with thumbs rubbing; stroking arms; cuticle picking.

Anxiety: nail biting; sighing; hand wringing; clearing throat; voice strained; lips quivering; rapid eye movement.

Frustration, anger: making fists; hands on hips; lips pressed together, jaw muscles tight; running fingers through hair; hostile stare.

Defensiveness: folded arms; crossed legs; looking at door; stalling for time by cleaning glasses, rearranging, etc.; hand rubbing back of neck.

Body language is open to misinterpretation just as verbal communication is. It must be interpreted in the context of one's lifestyle, family, cultural background, and other factors that may be obscure. Each person has a limited repertoire of gestures and uses the same gestures to signify certain feelings. Gestures also can occur in clusters, so that while any particular gesture alone may not mean much, when it is reinforced by other gestures in a cluster the feeling or attitude being projected is confirmed.

Barriers to Effective Communication

Effective communication is a difficult task. The CPA may be well versed in communication skills, however under the best conditions and

with the most skillful communicator, barriers to effective communication may still exist.

If we can recognize these barriers we have taken the first step toward reducing or overcoming them.

Barriers may come in different forms and from various sources. For the purpose of this module, the barriers are presented as physical, social, or psychological. Examples of these barriers follow. The examples are not meant to be an exhaustive list.



Physical Barriers

Physical Barriers may include noise; lighting; temperature; physical setting; client disabilities (loss of hearing; vision loss; speech difficulties).

The physical setting of the site where interaction occurs may be a barrier to communication. Poor lighting, uncomfortable and/or poorly situated seating, temperature (too hot/too cold) may affect the feelings of those engaged in the interaction.

You may have little or no control over the physical location, however, there may be things that you can do to make the environment better than it is. Organization/reorganization of space may make the location more user friendly. If there is noise distraction, this may make hearing difficult and may become a serious barrier to communicating. Explore ways to reduce any external distraction. Try not to let phone calls interrupt an interaction with a client. Would pictures, flowers, additional lighting, a little paint make your physical environment more inviting?

Social Barriers

Social Barriers may include stereotyping; cultural differences; client resistance; CPA level/method of communication.

Stereotyping is one of the most common perceptual barriers to communication. Stereotyping is when we assume that the person (client) has certain characteristics based on the group to which they belong.

The world in which we live becomes more culturally diverse each day. We interact with people from different races, religions, and nationalities.

Knowing about other cultures will help you develop your skills. It is impossible to know the varied systems of all cultures, so approach this process one culture at a time as you meet and deal with new people. Our goals, dreams, and aspirations may be more alike than our skin color. Parenting approaches may differ, but the common bond of a mother crosses many barriers. Most people have basic needs in common, like Maslow's hierarchy

of need suggests that all people have basic physiological, safety, acceptance, self-esteem, and self-actualization needs. Considering these things it is easy to see our essential common ground. And this is where we can begin our comprehension of others.

(http://ga.essortment.com/culturalcommuni_raxq.htm)

Client resistance may stem from several sources. They may reject any message that contradicts their beliefs and assumptions. Lack of interest, inability to understand, or weak reading and listening skills may also cause the client to resist the interaction.

The CPA must accept the responsibility of making the CPA/client interaction a positive. You may do this by: (1) making sure that the client has adequate knowledge to understand the message, (2) not using words and examples that are unfamiliar to the client, (3) making sure that you have the client's attention, (4) not using more words than are necessary to convey the message.

Psychological Barriers

Psychological barriers may include clients emotions; client resistance to accept the message; "self-fulfilling prophecy"; and/or interpersonal relationships.

A person's state of mind may interfere with a successful interaction. There could be a multitude of reasons for this; personal problems, health, marriage, work, . . . the list could go on and on. The bottom line is, if the client is preoccupied the message may not get through. This among other factors may cause client resistance to receiving and acting

on the message. An awareness on the part of the CPA may facilitate the interaction. As previously mentioned, the CPA needs to give attention to establishing a positive rapport with the client.

The concept of the self-fulfilling prophecy can be summarized in these key principles:

- We form certain expectations of people.
- We communicate these expectations with various cues.
- People tend to respond to these cues by adjusting their behavior to match them.
- The result is that the original expectation becomes true.

http://westrek.hypermart.net/mngmnt_artcls/motivate_02b.htm

We may transmit cues that send a negative message to the client. Consciously or subconsciously, at any level these cues may indicate our expectations of the client. An awareness of the concepts that have been previously discussed in this module may reduce some of those cues. Listening properly, responding openly and supportively, being aware of nonverbal behavior, and removing or reducing some of the barriers to communicating will facilitate a positive interpersonal relationship with the client.

Activity

List some barriers to communication that you may have experienced in the past. Suggest some strategies that reduced or could have reduced the barrier:

Barrier: _____

Strategies: _____

Barrier: _____

Strategies: _____

Barrier: _____

Strategies: _____

Barrier: _____

Strategies: _____

“Kind words can be short and easy to speak but their echoes are truly endless.” – Mother Teresa

Case Scenario

The following is a case scenario. Review the scenario and note how effective communication skills facilitated a positive interaction between the CPA and the WIC client.

Jessie and Joe have 3 children under the age of 5. Joe works as an auto mechanic and Jessie stays home with the children. She cannot afford to pay daycare for 3 children in order to work. All of the children have been on WIC since they were born. As Jessie sits in the WIC clinic waiting room with one child crying due to needing a nap, one turning a chair over, and one eating a sack of animal crackers she dreads how she will be told that all 3 of her children have a BMI that means that they are overweight. She gets tired of being told that her kids need to eat more fruits, vegetables, lowfat milk, lean meats, and need more physical activity. She does the best she can with her meager budget for food and recreation.

As the CPA walks Jessie to the room carrying Jessie's baby, she comments, "Jessie, thanks for coming today for your WIC visit. I know it's hard to sit in the waiting room with 3 children." Jessie thinks to herself, "She can identify, at least a little." Jessie feels welcomed into the CPA's room as she offers the kids some toys to play with.

As the CPA directs her attention to Jessie she asks, "Jessie, do you have any concerns about the way your kids are eating or the way they are growing?"

Jessie answers quickly, "No." She hopes she will get out of there quick.

CPA: "So you feel good about the type of foods you offer, the amount they eat, and the way they are growing."

Jessie: "They are getting fat. Sometimes that bothers me at the park when they are not able to keep up with other kids their age because of their weight."

CPA: "I can see where that may bother you when your kids don't seem to be able to be as active as they need to be. How often do you take them to the park?"

Jessie: "We go a couple of times a month. It's hard to plan around naps and meals to make it to the park."

CPA: "On the days you do make it to the park, what have you done to make that happen?"

Jessie: "Well, I have gotten up earlier and been able to have stuff done before the kids get up. I have also packed a snack."

CPA: "It sounds as if you feel good when you are able to get up early and get stuff done so your family can have some play time."

Jessie: "It does feel good."

CPA: "Jessie, what could you do to make some more play time in your days?"

Jessie: "Well, I spend at least an hour every night watching T.V. shows that I don't need to watch. I could go to bed earlier. I could also make sure I set my alarm to go off and have my husband help me to remember."

CPA: “That sounds like some good ideas. Are you interested in discussing some ways to help your children play and be more active in that time you are going to set aside for them? I have some good ideas from other Moms.”

Jessie: “That would be great.”

Jessie left feeling like a good Mom. A Mom who was welcomed into the WIC clinic, identified with, listened to, and trusted to

come up with her own ideas of what she can do to help her family be healthier. She also worked with the CPA to come up with some affordable, healthy snack ideas for their play time.

Next time she won't dread going to the WIC office near as much. She may even mention that she is having a hard time weaning her baby from the bottle.

POST-ASSESSMENT

The post-assessment questions which follow are intended to assist you in determining whether you have achieved the objectives of this module.

Instructions: Read the questions which follow and respond to each on a separate sheet of paper.

1. Why is effective communication vital to building positive relations with WIC clients?
2. How might your nonverbal communication create an obstacle to a positive interaction?
3. Identify three ways that you as a CPA create a physical, social and/or psychological environment that will maximize the probability of a positive interaction.
4. List five body gestures by the CPA that might be interpreted favorably by clients.

Note: After completing the post-assessment do a self-assessment to determine to your satisfaction that you have successfully completed the module.

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PRE-ASSESSMENT ANSWER KEY

1. T___ F___ Effective communication should be more expressive than receptive.

False: The more successful interaction will include active participation by the sender of messages and the receiver of messages.

2. T___ F___ Your listening style refers to how you listen and respond and may vary with circumstances.

True: There is no "correct" or "best" listening style. The style will depend on circumstances such as time, purpose, content, etc.

3. T___ F___ The listener who can reflect back both the feeling and content of the message is referred to as an active listener.

True: The active listener gives the speaker attention, interest, and acceptance, and expresses both by nonverbal and verbal language that the content of the message as well as the senders feelings are important.

4. T___ F___ Of the time we spend communicating, approximately 30% is spent speaking.

True: This indicates that 70% of communicating occurs in some means other than verbally.

5. T___ F___ Questioning, both open and closed, is effective if used appropriately in the right situation, at the right time.

True: Questioning seeks to elicit more information. Open questions promote communication, while Closed questions focus on specific facts or aspects.

6. T___ F___ There is a high correlation between poverty levels and levels of literacy.

True: A significant portion of WIC enrollees will have low levels of literacy skills (difficulty in reading).

7. T___ F___ Over the past few years, the number of Hispanic WIC participants has decreased, while the percentage of black and white participants has risen.

False: In 2002, Hispanics made up the largest group of WIC participants.

8. T___ F___ Communication in written form may be made more effective by using fewer words, shorter sentences, and shorter paragraphs.

True: Many formulas use a word count, factor in length of sentences and paragraphs to determine the level of readability of written materials.

9. T___ F___ During interpersonal communication, most of the message is transmitted verbally.

False: Research has indicated that approximately 93% of interpersonal communication is nonverbally transmitted.

10. T___ F___ Body language is open to misinterpretation, just as is verbal communication.

True: Any form of conveying a message may be misinterpreted. Consistency and a pattern of gesture use confirms the feeling or attitude that is being projected.

11. T___ F___ The “self-fulfilling prophecy” concept is primarily controlled by the CPA.

True: When we convey cues that send a negative message to the client, behavior may be adjusted to meet the expectations conveyed.

MODULE EVALUATION

Module II: Effective Communication

Please take a moment to provide feedback on the training that you received.

Date: _____

Your Position: RN____ LPN____ RD,LD____

How long have you been working with WIC clients?

____ less than 1 year; ____ 1-3 years;
____ 3-6 years; ____ more than 6 years.

For the following items, please circle the number that best describes your opinion as a result of completing this module.

- 5 = Strongly Agree
4 = Somewhat Agree
3 = Somewhat Disagree
2 = Strongly Disagree
1 = NA (not applicable or not able to answer)

1. After completing this module I am now more aware of the need for and the role of effective communication in my day to day work as a CPA working with WIC clients.

5 4 3 2 1

2. I found the module section on "Listening" to be very informative and helpful.

5 4 3 2 1

3. I found the module section on "Speaking" to be very informative and helpful.

5 4 3 2 1

4. I found the module sections on "Reading" and "Writing" to be very informative and helpful.

5 4 3 2 1

5. I found the module section on "Nonverbal Communication" to be very informative and helpful.

5 4 3 2 1

6. I found the module section on "Barriers to Communication" to be very informative and helpful.

5 4 3 2 1

For the following items, please circle the number that best describes this module:

1. Module was accurate, up-to-date, well organized and easy to follow.

5 4 3 2 1

2. Instructions were easy to follow.

5 4 3 2 1

3. What I learned in this module will be extremely useful.

5 4 3 2 1

4. I would recommend this module to others.

5 4 3 2 1

Any other comments or suggestions:

REQUEST FOR CONTINUING EDUCATION ACTIVITY CERTIFICATE

Evaluation form of the module you have completed must be included with this form to receive a CEU Certificate.

Please Print or Type:

Name: _____

Title: _____

RD# _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Send the two items listed below to:

WIC Nutrition and Breastfeeding

5800 W. 10th, Suite 810

Little Rock, AR 72204

We will not send a certificate unless we receive both items.

- ✓ Module Evaluation
- ✓ Request Form