

## Unit 2: Psychiatric Nursing - ONLINE CONTENT – Lindsey Steele

During my time working in healthcare, I have been told numerous times that I demonstrate good eye contact. I have been told this by patients, employers, and family members. Eye contact is a nonverbal communication technique that shows active listening and benefits a conversation. From my experience, direct eye contact during a conversation allows for trust to be built and a relationship can form. When a patient feels they are being listened to they have a higher tendency to open up about their stressors. When a patient is in a vulnerable situation, maintaining eye contact can also be a form of empathy. I have noticed many patients need a person to talk to so they can get their feelings out as a form of coping. Another nonverbal communication technique I have used is smiling. A smile can convey friendliness and compassion which can reduce anxiety. When a person feels welcomed they are likely to have a positive experience with that person. These two skills build a therapeutic relationship. When a nurse demonstrates these skills, a patient is likely to be honest, vulnerable, and express more concerns, which allows the nurse to create goals and understand the patient. I will use these skills and be more self-aware when communicating with a patient in the future. An example would be identifying a patient's facial expression when conversing with them. Facial expressions can be a form of communication that is important to understand. If a patient is nonverbal and grimaces, wince, limp, or groans, it can be assumed they are experiencing pain or discomfort. Other components of nonverbal communication I can utilize in the future are body movements, posture, physical appearance, eye behavior, touch, or posture. I mentioned how I had been told I use good eye contact, and eye behavior is a part of that as well. If eye contact is used too much, a patient could receive a negative connotation. Having a smile, raised brows, and widened eyes can foster a happy and positive approach.

A verbal communication technique I have been told I do well is presenting an accepting tone of voice and word choices. An example of this would be open-ended questions, acknowledging the person, saying I understand, and being encouraging. With these factors in mind, I gather I do empathetic communication well. This focuses on my ability to understand one's feelings and respond accordingly. I can ask open-ended questions to gather information on my patients and respond in a non-judgmental and supportive manner. I can use this self-awareness to strengthen my therapeutic communication in the healthcare setting. I will do this by spending more time thinking about my response before I say it. I can give broad openings in my conversation to allow the patient to have control. I can nod, smile, and use direct eye contact to show I am listening and understanding to my patient. Empathy is important because it contributes to self-awareness, the nurse can create goals for the patient and pick up on their non-verbal cues. Other examples of therapeutic verbal communication would be to voice doubt, verbalize the implied, and reflect with the patient. These examples build rapport, and trust, and identify the patient's concerns. On the other hand, an example of a nontherapeutic communication technique is giving false reassurance. This minimizes the patient's concerns and can discourage the patient from being honest. Another example would be rejecting, because it can cause the patient to retract in the conversation due to the fear of further rejection. Other nontherapeutic examples are approving or disapproving, giving advice, defending, or requesting an explanation.

When I first started working in healthcare, I was sixteen and did not fully understand proper communication. I struggle to talk to the nurses, my peers, and the patients. Over time, I developed an understanding of being attentive and understanding what a person is saying

both verbally and nonverbally. Probing is a nontherapeutic communication technique because it can make the patient feel questioned, cause defensiveness, and may upset them. To gather information instead of probing, active listening can be utilized. Active listening is listening actively, attentively, and having a desire to hear and understand what is being said. Using silence is a good tool for active listening because silence can encourage the patient to gather their thoughts and feelings to explain. While a patient is speaking, I can attempt to translate their words into feelings, focus on their tone, and reflect.