

Title of Educational Activity:

Mindful Listening

Purpose / Goals:

To provide information and tools to assist the health care professional in communicating more effectively through the client/patient / care giver relationship, as listening is a significant part of the communication process.

Objectives	Content (Topics)	Teaching/ Learning Resources
List the educational objectives.	Provide an outline of the content/topic presented and indicate to which objective(s) the content/topic is related.	List teaching/learning resources used for each topic or content area.
<p>1. Response to and discuss the question: “What is communication?”</p> <p>2. Discuss the various benefits to incorporating deep listening into a health care practice.</p> <p>3. Describe the Myths of Listening.</p> <p>4. Identify and discuss “what makes a mindful listener.”</p>	<p>I. Communication - What it is</p> <ol style="list-style-type: none"> A. It is NOT about words B. It is about connecting with another person C. It is about deep listening D. It is about frank and honest dialog E. It is about trust <p>II. Development of listening skills</p> <ol style="list-style-type: none"> A. Increase in patient satisfaction B. Increase in patient retention C. Increase in best possible clinical outcomes. D. Increase in patient loyalty E. Increase in word of mouth referrals F. Increase in patient cooperation compliance <p>III. The Myths of Listening</p> <ol style="list-style-type: none"> 1. Listening means agreeing: agreeing is not good listening 2. Listening is a lot of hard work: focused, deep listening takes 45 seconds 3. Listening requires you have to “act like you’re listening.” 1. Listening takes too much time: people interrupt their clients after the first 12-14 seconds of the client speaking. <p>IV. What Makes A Mindful Listener</p> <ol style="list-style-type: none"> A. A mindful listener “gets the whole picture”, not just the words but gestures, tone, attitude, expressions and pauses which tell the listener a great deal of information. B. Able to sustain attention over time. Average adult attention span is 22 seconds C. A good listener makes the speaker feel valued and respected no matter how different their point of view is. D. Non-Verbal Information <ol style="list-style-type: none"> 1. 95% of information is non-verbal 2. 7% of information is conveyed by words 3. 44% is conveyed by facial muscles 4. Combinations of facial expressions 5. Non-verbal messages come at a rate of 150 per second 	<p><u>Media Course:</u> <i>Mindful Listening with Rebecca Shafir, MA, CCC</i></p> <p><u>Assigned Reading:</u> All handouts and articles provided</p> <p><u>Recommended Reading:</u> <i>The Zen of Listening by Rebecca Shafir, MA, CCC</i></p> <p><u>Written Assignment:</u> <i>Following the essay writing instructions found in the Orientation section of this curriculum, respond to all the numbered Learning Objectives found on the class outline. In addition, discuss how you would apply this information to your personal lifestyle, health and wellness. Essays must be a minimum of 1000 words in length.</i></p>

<p>V. Describe the barriers to good listening.</p>	<p>V. Barriers to Good Listening</p> <ul style="list-style-type: none"> A. Critical Self-Talk B. Wanting to get to our ego agenda C. Past Experiences D. Pre-occupation with self needs E. Resistance F. Prejudice G. Past Mistakes H. External distraction I. Bias and opinions 	
<p>VI. Discuss ways of fixing poor listening skills</p>	<p>VI. Tools to Fix Poor Listening Skills</p> <ul style="list-style-type: none"> J. Observation K. Appreciate yourself L. Accept a compliment M. Give others benefit of the doubt N. End negative self talk O. Become conscious of your barriers P. Work to limit barriers Q. Meditate on becoming more open 	
<p>VII. Describe “Brain Training” techniques.</p>	<p>VII. Brain Training 101</p> <ul style="list-style-type: none"> A. “Telling Back” repeat what you have understood from your client/patient to be clear that you understand them correctly. B. Focus to get “the whole message” C. Become more mindful: focus is on the present event, not the past or future. D. Become aware of when you are Mindless when focus is on the future of past. E. Meditation can help focus 	
<p>VIII. List Listening Stoppers and Listening Helpers</p>	<p>VII. Listening Stoppers</p> <ul style="list-style-type: none"> A. Denial of clients reality B. Interruption C. Advise D. The “should” word <p>Listening helpers</p> <ul style="list-style-type: none"> A. Paraphrasing B. Allowing Silence C. “Watch the movie” D. Hold your tongue E. Get to the point with clients F. EDUCATE and use drawings to help G. Avoid jargon and be sure to “tell back” 	

Rebecca Z. Shafir M.A. CCC

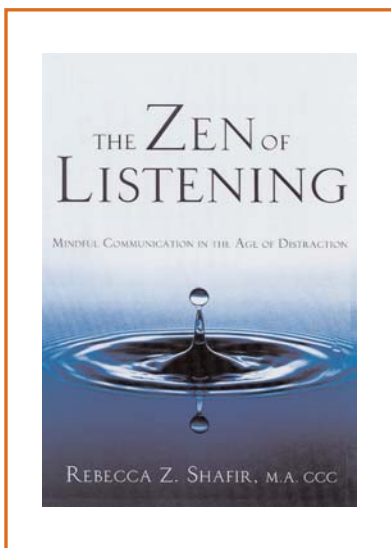
Speech/Language Pathologist
Communication Consultant

For more information contact Rebecca Shafir
www.MindfulCommunication.com
RebeccaShafir@att.net • (978) 255 -1817



Rebecca Shafir, author of the award-winning and best selling book *The Zen of Listening: Mindful Communication in the Age of Distraction*, a speech/language pathologist and communication consultant has coached radio and TV personalities, political candidates and other professional speakers since 1980. Her advice has appeared in the Wall Street Journal, Boston Globe, Washington Post and other major national publications. She is a sought after guest on radio and TV for her practical approaches for improving one's concentration and memory, and building customer and family loyalty through mindful listening.

Based upon research and interviews with hundreds of business, education, and healthcare professionals, Rebecca's talks are targeted towards meeting your particular organization's objectives. She is in private practice at the Hallowell Center for Cognitive and Emotional Health in Sudbury, Massachusetts. Rebecca's client list includes Genuity, Stratos Computers, Cisco Systems, University of Massachusetts, Hyatt Regency Hotels, Lahey Clinic, Boston Bar Association, John Hancock/Real Estate Investment Group and Sun Microsystems and Mathworks.



Author of the
award-winning
best selling book,
The Zen of Listening

Talk/Seminar Topics:

Customer-Driven Listening:
Working From the Inside Out
to Create Loyalty and Profit

The Five Greatest Listening
Mistakes

Fearless Public Speaking

Speaking with Impact: Voice
Coaching for Business
Professionals

Listening to Your Kids/Getting
Your Kids to Listen to You

Mindful Listening: A
Prescription for Better
Outcomes, Happier Patients
(for medical professionals)

Media Coaching for Authors

"It was indeed a pleasure to have you as our featured speaker at our annual Managers' Conference. Your exhaustive efforts to contact as many managers as possible prior to the event brought you in touch with our industry, our issues and our people. The construction industry can be a tough audience, and even more so, a room mostly full of men! You held their attention with a viable message which is extremely helpful as we move forward."

Jean-Marc Allard, CEO, Hubbard Construction

"Rebecca has readily accommodated to our needs to deliver courses that were timely, targeted and quality based. When I schedule a training session with Rebecca Shafir I can count on the fact that it will be of great value to our employees. It is Rebecca's quality, predictability and sustainability that make working with her a pleasurable experience."

Lynn Messman, Director
of Training, Epsilon University

"Rebecca's presentation on "Listening in the Age of Managed Care" was absolutely outstanding, and was very well received by our audience. The written evaluations were superb with many flattering comments about her talk. She is a truly gifted teacher, a dynamic speaker and a knowledgeable professional."

Allison O'Brien, Director of
Nursing Education, Lahey Clinic

"We just wanted to thank you AGAIN for coming on our show! We hope you enjoyed the interview as much as we did. It was great hearing how we (men) can make our relationships better at home - rave reviews from our callers too!"

Bill Maas, Sports Radio 810

"Our favorite guest! Rebecca is always refreshing. She has a way of explaining communication skills in a unique and interesting style. She approaches subjects in a thought-provoking manner and presents with more than the run-of-the mill approach."

Patty Adamson, Producer
for WEKZ 93.7

Thanks for the terrific seminar! We enjoyed it very much as you can see from the enthusiastic book sales after your presentation!

Bob Whitfield, Program Manager,
Sun Microsystems

"We could not have had any better closing to our conference than you! Your message, your enthusiasm and the audience participation had everyone leaving on a high note returning to work entertained, refreshed and more informed."

Don Gjesfjeld, Chairman,
Wisconsin Family Based Services

"What a refreshing and do-able approach to sales coaching! Our staff is still raving about how you inspired them to take a serious look at our ability to communicate with clients. And, the best part, is that my staff has put your techniques to work with great success!"

Mary Magner, Training and
Development Coordinator,
John Hancock Real Estate

"It was certainly a pleasure to have you as a guest on my national public radio program, *What's On Your Mind?* You were very easy to talk with and listeners were certainly drawn to the phone lines once you came on the air."

Linda Austin, M.D.

Rebecca Shafir

www.MindfulCommunication.com RebeccaShafir@att.net • (978) 255 - 1817

The Zen of Listening

by Rebecca Z. Shafir, M.A., CCC



One of the main reasons we listen poorly is because our internal noise levels are so turbulent and obtrusive that they mask most of what others are saying. Only bits and pieces of their message survive the barrage of our mental interference. Just as we have learned to manage external interference by tuning out, it has become somewhat of a challenge to tune in deeply enough to the messages we need to listen to -- those of family, coworkers, and customers. Misunderstanding, not being heard, and missing key information due to poor listening are at the crux of societal ills.

Traditional approaches to listening improvement are usually ineffective because they come from a point of view of altering surface features instead of reshaping the foundation. If we are to end the suffering associated with not listening, we need to dig deeper to get to the source so change can take place.

Many self-help books on personal relationships, negotiation, sales, and customer service tell us that good listening is essential to success in our personal and professional lives, but they do not explain how to listen. The available how-to approaches to better listening give you lists of new ways to behave, as if by magic you master techniques and stick with them. Just like after most self-improvement courses, you may try to force new behaviors for a few days, but gradually, because there is no foundation for these changes, your old tendencies to tune people out and repeat mistakes creep back.

As a speech/language pathologist for twenty years, I worked with adults with impaired ability to communicate due to stroke, head/neck cancer, head injuries, or degenerative diseases. By my late thirties, I was starting to show the classic signs of burnout. Even my relationships with family were suffering. External amusements such as trendy activities, shopping, money-making endeavors, and competitive sports with the objective of winning became appealing to me. I had become vulnerable to impulsivity, excessive goal setting, accumulation of material things, competitiveness in sports, and advising my siblings instead of just being a good sister -- attitudes and behaviors that disconnected me from myself and others. Despite all these self-inflating intentions, there I lay exhausted and unfulfilled after a day of trying to make myself a better person.

Seeking out new career opportunities held promise as a cure for my general malaise, but I had reservations. As many of you have already experienced, financial constraints tempered my impulse to make drastic changes. Instead, my intuition advised me to take a deeper look into myself and the way I related to others before abandoning a life's work for which my talent and personality were well suited. A major rethinking was necessary. I decided that it was worth going on a personal archeological dig to figure out what to do about my situation.

When I was a college student in the seventies, Transcendental Meditation had become a vehicle of self-discovery and a discipline that brought welcome clarity to eighteen credit hours of graduate work and two part-time jobs. Now, once again I began daily meditation. This enabled me to calm my mind and identify the inner obstacles that kept me from working with the system instead of against it.

During this renewal phase, I met my husband, Sasha. Aside from his job as a computer engineer, he was a third-degree black-belt martial arts instructor. Watching him, his students, and other instructors practicing various martial arts, I was mesmerized by their concentration and physical control. I admired their balanced state of mind and lack of self-consciousness in daily situations. These people were not monks or part of some spiritual cult, nor was their discipline violent or destructive. They were regular people, who owned businesses or were leaders in their communities. They too faced the same threats of layoff, crazy work schedules, and limited budgets, yet they were at peace with change and used their resources to find creative solutions.

After getting to know these people better, I asked myself, *Is the physical exertion of karate or kung fu the source of this concentration and serenity of spirit? Or is it the focus on quality of movement that improves the ability to attend completely and joyfully to the task at hand?* I believed it was the latter, since I had also observed this mind-body balance in artists, musicians, surgeons, and athletes. While painting, playing, dissecting, or diving, they were all willfully caught in the flow of their activities.

Looking back over the years, I recalled several such exhilarating periods of concentrated energy prior to my current burnout period. Many were memorable listening situations. I remember in college being totally absorbed physically and mentally in certain lectures, during medical rounds in my hospital training, or while being critiqued by someone whose opinion I highly valued. I recalled these moments of physical and mental readiness as a relaxed, balanced state, a connectedness between my mind and body. My next question was, *What if this zeal for quality and depth of concentration could be applied to one of our greatest needs, a gift so little used and so often taken for granted -- the ability to listen?*

In my search to regain and perpetuate this feeling of connectedness, I enrolled in a martial arts class and studied everything I could find about the mind-body relationship. By getting to know myself painfully through the eyes of my instructors, my reasons for becoming disconnected from my world were made clear. I decided to start over fresh, not by focusing on the results or the outcome of my actions, but with the prospect of being in the moment and discovering the quality in every interaction.

I started to apply this new awareness to what occupied the bulk of my day -- my work as a therapist. First, during this period of self-awareness, I noticed that when I interacted with patients and coworkers, I became distracted by my own agenda. Assumptions and periods of selective listening led me to miss valuable information.

I had become closed within the walls of my routine protocols. In my eagerness to treat the patient, I found myself lecturing patients and their families much too often and asking way too many questions. If they did not comply with my recommendations or the advice of their physicians, I judged them quickly, dismissing their reasons for not following through. I could see how much time was wasted in reinforcing practice, re-explaining, and revising treatment plans. What was at the heart of all this redoing? By not fully listening to the patient or to my own spoken words, I was actually making more work for myself and stalling progress.

Because of my egocentric way of trying to help my patients, it was no wonder why I, and so many others, left the office exhausted and frustrated most days. I remembered the words of a favorite professor in graduate school that pointed to the importance of listening in a learning situation: "If you do not get to know where that patient is coming from (his background, expectations, etc.) you cannot understand him, and he will not trust your advice."

I have had the pleasure of working with many physicians who have taught me the true meaning of the expression "bedside manner". With other doctors, however, I have seen how failure to listen to the patient adversely affects the accuracy of the diagnosis and subsequent treatment. Too often the patient is not given a chance to mention what's on his mind, to share his insight into his health problem. Just as often, due to various communication barriers, a patient does not understand his doctor's explanation of his illness.

Not only good medical practice, but any successful business requires optimal listening on both sides of the table. In all industries and, most importantly, in the home, a good bedside manner is the best medicine for solving disputes and getting along with others. Whether we are salespeople, parents, or provide some service, people come to us in need. Quite often they require assistance or are in distress, very much like someone who is ill or dying. They look to trust us in the same way that a patient looks to trust the judgment of a physician. We can all benefit from improving our bedside manner. It does not necessarily mean taking more time, but rather more willingness to see a situation through the eyes of the speaker. How can we achieve a positive outcome with each person we come in contact with if our scope is narrowed by self-interest?

From a spiritual and social point of view, listening can be a powerful tool of change. Schoolteachers and counselors, prior to taking my listening class, report their jobs are getting more stressful because they cannot handle the listening needs of their students and clients. If children are not heard by their parents, if their emotional concerns are not taken seriously, they become behavioral problems at home and in the classroom. Hours of TV and video games splinter whatever remains of attention and concentration for schoolwork, and grades suffer. A lack of proper listening role models may lead to frustration, violent outbursts, and loss of self-control. Poor self-esteem cultivated over time leads to substandard performance in the workplace and

unhappy family relationships as the ravages of poor listening are handed down to the next generation.

When a person is given a chance to tell his views without the threat of judgment or advice, even if his listener does not agree, that is the first step toward creating good feelings. A sense of openness on both sides allows for discussion and problem solving. Self-esteem grows from the respect that comes from being heard. People are better able to attend to school lessons, projects, and the responsibilities of the workplace when basic emotional needs, like being understood, have been met. Henry David Thoreau said, "The greatest compliment that was ever paid to me was when someone asked me what I thought, and attended to my answer." When confidence grows, we are better able to discover our potential and positively influence others. Mindful listening has the power to change the direction of our lives and those we come in contact with every day.

Listening is also a healthy activity. Studies show that when we listen, heart rate and oxygen consumption are reduced and blood pressure decreases. Contact with others promotes well-being and self-expression, both necessary for good physical health. By being good listeners, therefore, we promote the good health of others by allowing them to reduce their stress and empowering them to solve their own dilemmas. An empathetic listener provides helpful feedback that makes the speaker feel valued. This is a significant gift in a world where the human touch is a rare commodity.

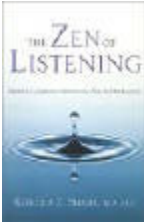
Many of us would like to see an end to discrimination of all kinds, happier families, and a safer, more harmonious future for our children. But how can we as individuals make a difference? We can begin by learning to listen in a mindful way.

Listening is the first step in making people feel valued. Mindful listening allows us to do more than take in people's words; it helps us better understand the how and why of their views. When understanding occurs, a sense of calm is achieved on both sides, even if no point of agreement is reached. From understanding, respect and trust for one another are possible; we are free to open our minds and widen the scope of potential solutions. Listening is also the first step in any negotiation, whether it means getting your teenager to clean the garage or arranging a cease-fire in the Middle East.

On New Year's Eve 1999, Larry King, on his nightly TV talk show, invited eminent spiritual leaders to share their hopes for the Third Millennium. The Dalai Lama looks to the twenty-first century as the "century of dialogue". Evangelist Billy Graham claims that "world peace can come only from the human heart. Something has to happen inside of man to change our attitude."

How do we start changing our attitudes? By listening in a mindful way and becoming aware of what habits we can change today and what habits need to change over time. Sometimes all it takes is someone or something to come our way to make us stop and think about the need to be heard. By taking the ideas in this

book to heart, not only will you accomplish more through communicating effectively, but you can begin to make a daily personal contribution to world peace.



This article is excerpted from **The Zen of Listening**, ©2000, by Rebecca Z. Shafir. Reprinted with permission of the publisher, Quest Books, The Theosophical Publishing House.

About the Author



REBECCA Z. SHAFIR, M.A., CCC, is a certified speech/language pathologist at the Lahey Clinic in Burlington, Mass. A ten-year student of Zen, she teaches communication workshops nationwide and has coached media personalities and political candidates since 1980. She presents a variety of programs ranging from keynote addresses to weeklong seminars tailored to meet the individual needs of corporations, healthcare institutions, professional associations, universities, and the general public. For more information or to share your experiences with mindful listening, send your letters to: Rebecca Z. Shafir P.O. Box 190 Winchester, MA 01890. Visit her website:

www.mindfulcommunication.com

‘Mindful Minute’ sets stage for trust

Uninterrupted time allows physician to mentally lock into the patient

By Sandra Lee Breisch

How can you make your patients feel heard, valued and empowered? "Simply listen wholeheartedly and don't interrupt them for the first 60 seconds of the visit—and then listen to them some more," says Rebecca Z. Shafir, chief of the department of speech pathology at Lahey Clinic, which provides primary and specialty care at Lahey Clinic Medical Center in Burlington, Mass.

According to Shafir, the first 60 seconds of the visit are critical. "It's the most powerful step in setting the stage for establishing trust and empowering patients to be a partner in their care," she says. "It's what I call a 'mindful minute' that allows you to mentally lock yourself into the patient, put aside your ego and its agenda to allow the patient to share their health concerns and insights."

Yet, many physicians typically interrupt a patient about 7 to 13 seconds into the visit, notes Shafir. "These interruptions make a patient feel rushed, nervous and not cared for," she says. "If given the opportunity to talk, patients will often provide the physician with information sufficient for making a diagnosis. Patients will also have the time to be more specific about their symptoms and revise inaccurate word choices often used due to nervousness. This uninterrupted time makes the 'mindful minute' powerful for both patient and clinician."

Other common listening mistakes include "not allowing silence and letting our minds wander to the past or future," notes Shafir. "These listening mistakes can jeopardize the patient/physician relationship because we all look for the patient to be compliant with their medical care which leads to better outcomes," she says. "Also, when 'mindful listening' is present, there is trust. Trust leads to loyalty. We want our patients to repeat their business with us and tell others about us. What physicians do not want are costly and unnecessary hospital admissions and extended stays or malpractice suits related to listening mistakes."

And patients do know when a physician is really listening.

"Patients will pick up cues like eye contact, appropriate responses such as stillness, head nodding, etc. and they will sense a genuine concern," explains Shafir. "But if you mechanically employ these maneuvers and act like you're listening, patients will quickly sense your insincerity and in many cases they'll withhold information and never return."

Once a physician "listens mindfully—free of internal distractions," Shafir says, "patients will say things like, 'I'm not used to doing all the talking,' or 'thank you for listening to me.' And they'll also complain, 'I wish other doctors listened to me like you.'"

However, if a patient talks endlessly and a physician needs clarification, Shafir says, "You can say, 'Excuse me, Mr. Smith, can we get back to....' You could also ask your patients to jot down anything they felt was not discussed and/or important to their visit. Ask them to hand it to your nurse or physician assistant. Assure them you'll look it over when you've time."

Because Shafir believes that effective listening originates from an "inner state of calm and mindfulness," she suggests physicians use Zen-like meditation techniques or other focusing techniques. "Daily sitting meditation, from 5 to 30 minutes a day is the best way I know to calm the internal distractions that interfere with listening," explains Shafir. "If that sounds like too much of a time commitment start small with a 'mindful minute.' Pick a routine task like drinking your orange juice. Hold the glass of juice in your hand for a few seconds and feel the weight and the temperature. Sniff the citrus perfume. Think about the process from orange tree to the juice in your glass. Savor the tart sweetness. Welcome the nutrients.

"Your 60 seconds is up. In that time you were focused in the present, silent, getting the 'whole message' that glass of orange juice was sending. Adding more 'mindful minutes' to your day will gradually help you become comfortable with silence—the essential ingredient to mindful listening."

A physician can improve his or her own health, too. "Mindfulness and meditation which form the basis of 'mindful listening' have been shown to reduce blood pressure rates, even in the face of stress," Shafir says. "As managed care places greater demands on our time and resources, we need to hone the skills that can keep the stress levels to a minimum. Listening is one of them. I can think of a few things that are more stressful than not listening—and one is a malpractice suit. Many malpractice claims are attributed to patient complaints that their physician did not listen to them."

Communicate welcomes suggestions about future topics for the column on patient-physician communications. Send your suggestions to the *Bulletin* at AAOS, 6300 N. River Rd., Rosemont, Ill. 60018.

Listening to Ourselves

by Rebecca Z. Sharif, M.A. CCC



If we could listen to ourselves as we converse, we would probably be astounded at how often we speak mindlessly. We are so taken up with being the speaker that, quite innocently perhaps, we make insensitive comments, speak inaccurately, or talk too much, hardly aware of the effect of those actions. Mindless speaking is a proven listening stopper.

For example, I was recently corrected by a patient, notorious for her attention to detail, for using the word *girl* to refer to a twenty-year-old woman who worked at the desk. I meant no harm by that slip of the tongue, but in the eyes of my patient it was offensive.

Having heard that I was from Chicago, a native New Englander asked me if I noticed any differences between Bostonians and Chicagoans. In the past I might have mindlessly responded that I felt that people in Boston tend to be less friendly and more conservative. These words would have certainly ruffled his feathers. Now when I'm asked such a question, I try to consider my listener before I speak. I might say, "Bostonians appear to me to be more private," or "Bostonians take a little more time to get to know strangers." Both statements communicate my perceptions without hurting anyone's feelings.

The last time you were faced with an angry customer, did you make things worse by giving excuses or stating company policy? Ugh! According to Jeffrey Gitomer, public relations consultant, customers hate the word policy. The next time, shift your perspective to the customer's concerns. You might say, "Yes, that's terrible. The fastest way to handle that is . . ." It is likely that you will keep that customer.

Think of the times when others have offended you. Did they say those things on purpose? Couldn't they sense your embarrassment or irritation despite your smile? No, probably not. They were deep in their own movies, unaware of yours.

Interestingly, the more mindful you are of the movies of your speakers, the more sensitive you become to your own words. The next time you say something you regret, notice whether you were propelled by self-consciousness, ego fulfillment, or disrespect for the speaker's perspective. Smile at your newfound awareness, knowing that this discovery will prevent future mindless moments. Avoid putting yourself down. Instead, remember that your intentions were good. Next time, notice how much more appropriate your comments are when you are mindful of not only your intent, but the perspective of your listener. You will say less and learn more. Your mind won't wander around looking for a clever rejoinder so that your conversation partner can see how clever and amusing you are.

Mindful Meditative Listening

One of the benefits of meditation is that you learn to pause before you speak. Meditation deautomatizes your false self, the part of the ego that is self-conscious, insecure, righteous, and deluded by your barriers. If your foundation for listening is not based on meditation and mindfulness, it feels awkward and mechanical to stop and think before speaking. You have to first clear your mind of traffic, stop wondering what the other person is thinking about you, get comfortable with the silence, try to remember what the speaker just said, and formulate a response. Drudgery of this sort discourages you from making self-listening a habit.

Fortunately, daily mindfulness practice makes it comfortable and natural to take in the whole message and choose your words carefully in much less time and with greater accuracy. Your words must match as closely as possible how you feel and what you want. However, there are many interpretations out there. Aside from words alone, other features of your speech can flip the meaning. Varying combinations of characteristics like speech rate, pauses, pitch contour, emphasis, loudness, facial expression, and eye contact may concoct a message well beyond your intent.

Mindful listening includes the ability to listen to what you say and make necessary changes. When writing a memo, you are more careful with word choice. Because you can see what you want to communicate, it is easier to review your message and edit vague or inaccurate information. Why should you be any less careful when speaking? How many times have you said "left" when you meant "right," or "Tuesday morning" when you meant to say, "Thursday morning" and later paid the consequences?

Just as you carefully watch your footing on a steep and rocky path, you should speak with the same care to avoid injury or costly mistakes. You make a statement, hear it back in your head, and study your listener to be sure it was received the way you meant it. If you notice frequent discrepancies between your intention and the reaction of your listener, you need to examine whether 1) your words accurately represented your thoughts, 2) your tone of voice or physical movements contradicted your intended meaning, 3) your listener interpreted your meaning from his unique cultural perspective rather than yours, or 4) your listener chose not to accept your point of view or did not process the information accurately. Listening to yourself, like listening to others, is an art. It requires mindfulness to match your intent with appropriate words and be sensitive to the way others perceive them.

There are ways in which you can communicate a personal intent without overusing I. You might begin a sentence with "It seems to me," or "It has been my experience that. . ." or "My feeling is. . ."

Here's an alarming fact: of approximately eight hundred thousand words in the English language, we use about eight hundred on a regular basis. Those eight hundred words have fourteen thousand meanings. By division there are about seventeen meanings per word. In other words, we have a one-in-seventeen chance of

being understood as we intended. Perhaps you've heard of Chisholm's Third Law -- If you explain something so clearly that no one can misunderstand, someone will.

Again, this is where listening to yourself comes in. Be mindful of matching as closely as possible your words to your thoughts. Sometimes a short rehearsal on the way to an important meeting is a good way to hear back what you intend to say. Keep the number of words to a minimum. Outline the main issues in your mind or on paper. Weigh every word cautiously and check your listener periodically to see whether he is perceiving you correctly. Eliminate foggy words or phrases such as, "It is my determination that Johnny is demonstrating indicators of increased positive socialization with various classmates and his teachers," and replace them with "Johnny is getting along better with others." This word-by-word or phrase-by-phrase evaluation is particularly necessary when the discussion is complex or emotionally charged. As an extra check, encourage your listener to tell back or paraphrase your message to be sure it was delivered as you intended. These three steps -- rehearsing, self-evaluating, and rechecking -- can make you reasonably sure that you connected with your listener.

You must also be aware of comments or vocalizations that send a message you do not intend. For example, to some, nodding or saying "Uh-huh" suggests agreement. To others it simply means, "I am paying attention." There is no single universal interpretation of body movements or facial expressions. As our towns and workplaces become more culturally diverse, you must not expect people of different nationalities to respond nonverbally in the same way you do. A head nod in one culture (Japanese, for example), means, "I'm following you." In India, the same nod indicates disagreement.

Gestures and voice inflection should serve to emphasize and reinforce key words or phrases. These help the listener identify the important points, almost like using a highlighter pen to help you remember main ideas on a page.

Hold Your Tongue

1. If you are a chronic interrupter, halt your interruption midsentence and say, "Excuse me. Please go on with what you were saying." In time, you will catch yourself before you interrupt. However, if from the start of the conversation you get into their movie, your focus will not be on your agenda anyway; you will be totally absorbed with understanding your speakers, and there will be less tendency for you to interrupt.

2. As a speaker, there are acceptable ways to stave off an interrupter. Watch some of the political group discussions on CNN to learn the technique. When someone jumps in on you to disagree or to dominate the conversation, hold up your index finger, signaling "Just a minute," and continue talking. If the verbal intruder persists, stop and say, "Let me finish and then I will listen to you." Continue with

what you were saying. Be mindful that the speaker may have a practical reason for interrupting (i.e., you are out of time; there is an important call for you).

3. If you need to interrupt for a legitimate reason, raise a hand to chest level and address the person by name. "Bob, excuse me, but due to time, we must get back on track," or "Linda, we are out of time." Using their names gets their attention.

4. The next time you have to give a talk or present an issue, find a private place and tape yourself on video or audio. It is often astounding to hear yourself as your listeners will hear you. Reflect on your choice of words, tone of voice, and other aspects of your presentation. You may well want to revise a few things. (By the way, your voice sounds different on tape. Most of us are familiar with our voices as they reverberate through our skulls. The recorded voice is very close to the sound that other people hear.)

5. In our quest to become compassionate listeners, "friendly" is a good place to start. Come up with a new, friendlier greeting for your voice mail. Avoid the robotic phrases you hear on everyone else's voice mail like, "I'm either on the phone, or . . ." No kidding! Smile as you speak, as if you just received a great compliment from your boss. Now listen with the ears of a stranger. Does it make you smile or feel welcomed? In the words of Jeffrey Gitomer, author of [Customer Satisfaction Is Worthless, Customer Loyalty Is Priceless](#), "Friendly makes sales -- and friendly generates repeat business."

6. To combat frequent swearing, practice using more acceptable expletives. Brainstorm a variety of synonyms to describe a person, situation, or anything else to which you might reflexively attach the swear word. For example, instead of saying, "That was the best f ----- cheesecake I ever ate," you might substitute "most delectable" or "exquisite."

7. To practice choosing words carefully, take a piece of paper and draw an abstract design. Find a partner and give him a piece of paper and a pen. With your design visible only to yourself, describe the shapes and locations on the paper as clearly as possible. See if your partner interprets your words as you intended and reproduces the design exactly.

8. Look for the subtle negatives in your habitual responses and turn them into positives. For example, if you are the appointment scheduler, you may find yourself in a rut response pattern, saying things like, "I'm sorry there's nothing open for you till next week." That comment makes others feel unwanted and disappointed. If there's nothing you can do to create the desired time slot, try making the same message positive: "Mr. Jones, you're in luck! Dr. Smith has an opening next Friday!"

9. Below is a list of negative responses. Keep the same message but make your listener feel good.

- **We won't have any more size twelves until Monday.**
- **Get in line with everyone else.**
- **You're really lost aren't you? Where's your map?**
- **You can't be serious about fixing this bike.**
- **Mr. Ramirez is waiting to get an important call. Call back later.**
- **Our new computer system has lost your file. Try back tomorrow.**

Here are some suggested answers:

- **Every Monday we get in a large shipment, including size twelves. May I put something aside for you next Monday?**
 - **To be fair to those who have been waiting, we need to make a line.**
 - **I'll help you get back home. Do you have a map, by any chance?**
 - **I'm really sorry, but this bike can't be repaired.**
 - **Mr. Ramirez is eager to speak with you, but he is helping another customer right now. May he call you back in a few minutes?**
 - **Today we're having some computer difficulties. I apologize for the inconvenience.**
-

LISTENING SKILLS

We were given two ears but only one mouth because listening is twice as hard as talking.

People need to practice and acquire skills to be good listeners, because a speaker cannot throw you information in the same manner that a dart player tosses a dart at a passive dartboard. Information is an intangible substance that must be sent by the speaker and received by an active listener.

THE FACE IT SOLUTION FOR EFFECTIVE LISTENING

Many people are familiar with the scene of the child standing in front of dad, just bursting to tell him what happened in school that day. Unfortunately, dad has the paper in front of his face and even when he drops the paper down half-way, it is visibly apparent that he is not really listening.

A student solved the problem of getting dad to listen from behind his protective paper wall. Her solution was to say, "Move your face, dad, when I'm talking to you." This simple solution will force even the poorest listener to adopt effective listening skills because it captures the essence of good listening.

GOOD LISTENERS LISTEN WITH THEIR FACES

The first skill that you can practice to be a good listener is *to act like a good listener*. We have spent a lot of our modern lives working at tuning out all of the information that is thrust at us. It therefore becomes important to change our physical body language from that of a deflector to that of a receiver, much like a satellite dish. Our faces contain most of the receptive equipment in our bodies, so it is only natural that we should tilt our faces towards the channel of information.

A second skill is to use the other bodily receptors besides your ears. You can be a better listener when you *look at the other person*. Your eyes pick up the non-verbal signals that all people send out when they are speaking. By looking at the speaker, your eyes will also complete the eye contact that speakers are trying to make. A speaker will work harder at sending out the

information when they see a receptive audience in attendance. Your eyes help complete the communication circuit that must be established between speaker and listener.

When you have established eye and face contact with your speaker, you must then *react to the speaker* by sending out non-verbal signals. Your face must move and give the range of emotions that indicate whether you are following what the speaker has to say. By moving your face to the information, you can better concentrate on what the person is saying. Your face must become an active and contoured catcher of information.

It is extremely difficult to receive information when your mouth is moving information out at the same time. A good listener will *stop talking and use receptive language* instead. Use the *I see . . . un huhh . . . oh really* words and phrases that follow and encourage your speaker's train of thought. This forces you to react to the ideas presented, rather than the person. You can then move to asking questions, instead of giving your opinion on the information being presented. It is a true listening skill to use your mouth as a moving receptor of information rather than a broadcaster.

A final skill is to move your mind to *concentrate on what the speaker is saying*. You cannot fully hear their point of view or process information when you argue mentally or judge what they are saying before they have completed. An open mind is a mind that is receiving and listening to information.

If you really want to listen, you will act like a good listener. Good listeners are good catchers because they give their speakers a target and then move that target to capture the information that is being sent. When good listeners aren't understanding their speakers, they will send signals to the speaker about what they expect next, or how the speaker can change the speed of information delivery to suit the listener. Above all, a good listener involves all of their face to be an active moving listener.

THINGS TO REMEMBER

1. If you are really listening intently, you may feel tired after your speaker has finished. Effective listening is an active rather than a passive activity.
2. When you find yourself drifting away during a listening session, change your body position and concentrate on using one of the above skills. Once one of the skills is being used, the other active skills will come into place as well.
3. Your body position defines whether you will have the chance of being a good listener or a good deflector. Good listeners are like poor boxers: they lead with their faces.
4. Meaning cannot just be transmitted as a tangible substance by the speaker. It must also be stimulated or aroused in the receiver. The receiver must therefore be an **active** participant for the cycle of communication to be complete.

MINDFUL LISTENING

While "attention" may be a hallmark of mediation (Lang and Taylor, 2000), it is the bedrock of mindfulness meditation. There is a story about a teacher who was asked about the highest teaching of Zen. He wrote the word "Attention" on the board. "But, isn't there anything more profound?" he was asked. "Yes, there is," he said and wrote the word "Attention" again. "But, there must be something more," insisted the student. "Yes, there is," the teacher said. And he turned to the board and once more wrote "Attention." Now the board said, "Attention, Attention, Attention." Therefore, "attention" is the beginning, the middle, and the end of meditation.

Besides, there are meditative qualities that mediators can develop to sharpen their skills. First among them is a *beginner's mind* or an ability to take things for what they are in the moment without judgment or preconceived agendas. "In a beginner's mind there are many possibilities; in the expert's mind there are few," so goes the saying.

Next is *mindful listening* which means be still and listen. "What is seen should be only the seen," said the Buddha. The same teaching applies to listening. If you have to think of leaning forward, mirroring the speaker's posture, maintaining eye contact, saying "Mm, hmm" often while nodding, you are not listening.

Third is *equanimity* or serenity, which is the last of the four Brahma Viharas or Divine States of mind. An aquanimous mind is poised and balanced and does not move reactively.

Fourth is *self-awareness and control*. Self-awareness is a precursor of attention and doesn't by itself catalyze any action. It gives the practitioner a split second to choose whether to act or not to act on an impulse, and also serves as an early warning mechanism to monitor communication barriers, directive impulses, and other hot buttons such as attachment and aversion.

Last but not least is patience, a rare virtue in a culture of instant-gratification. Some forty years ago, labor mediator William Simkin suggested "the patience of Job" among the attributes sought in mediators. Patience is even more important today, especially in situations where disputants come from cultural backgrounds different from each other's and from that of the mediator.

You may already be familiar with the above-mentioned qualities. Mindfulness meditation, however, could take you beyond the level of intellectual understanding to actually feeling and living these conditions.

Where does one go for further training? Mindfulness practice centers are located in many communities to teach the Four Foundations of Mindfulness. Some law schools in the country also offer mindfulness programs as a part of their curricular. Last year and for the first time, the ABA Section of Dispute Resolution offered a program entitled

"Mindfulness and the Personal Presence of the Conflict Resolvers" at the Seattle, Washington annual conference. The program was presented by Daniel Bowling and Leonard Riskin, two familiar names among professional conflict resolvers. You can go to the website of the Missouri-Columbia School of Law for Professor Riskin's calendar of events.

In conclusion, mindfulness meditation is more than a mental exercise, and it can bring quality to your work, peace to your mind, joy to your heart, and happiness to your home. It can be done sitting, standing, walking or even lying down.

Resources

Readings:

Henepola Gunaratana. Mindfulness in Plain English (Wisdom Publications Inc., 1991).

Kabat-Zinn, Jon. Wherever You Go There You Are: Mindfulness Meditation in Everyday Life (Hyperion, 1994).

Levine, Marvin. The Positive Psychology of Buddhism and Yoga: Paths to a Mature Happiness (Lawrence Erlbaum Associates, 2000).

Riskin, L. Leonard. The Contemplative Lawyer: On the Potential Contributions of Mindfulness Meditation to Law Students and Lawyers and their Clients, Harvard Negotiation Law Review, 1-66 (June 2002).

Smith, Jean (ed.). Breath Sweeps Mind--A First Guide to Meditation Practice (Riverhead Books, 1998).

Thich Nhat Hanh. The Miracle of Mindfulness: A Manual on Meditation (Beacon



Caring to Listen — Holistic Health Education

Today's Dietitian

By Kate Jackson

Vol. 6, No. 9, p. 38

Symptoms tell only some of the story. In this school of education, healthcare professionals learn to listen for much more.

According to a study by the Institute of Medicine, 90 million Americans are health illiterate—unable to understand the health information given to them. Georgianna Donadio, PhD, founder of the New England School of Whole Health Education (NESWHE), says this statistic, along with the alarming rates of obesity, diabetes, and heart disease, are evidence that the traditional model of health education and the usual means by which healthcare providers invite patient compliance simply don't work.

Over several decades, she's developed seven programs offered by the NESWHE to turn the tide. Two courses—the whole health educator program and the whole health skills program—are designed for healthcare providers who wish to work with patients in totality rather than merely address their symptoms. Traditional programs have tended to overlook the whole person, choosing instead to focus on the physical manifestations of illness. Healthcare providers are typically armed with vast amounts of information and finely tuned clinical skills. What they lack, however, is a deeper and truer understanding of the people they treat.

Although it wasn't her initial goal, Donadio created a new model that helps healthcare providers understand themselves better and work with their patients in a holistic context. "The healthcare provider has to understand the larger integrated picture of how things work together so that they can invite their patients into understanding, discerning, and choosing for themselves," she explains.

The whole health model of education and the NESWHE had their beginnings in the early 1970s and grew out of Donadio's personal and professional challenges. A 22-year-old nurse, she was involved in an accident that left her unable to walk. After two years, her general practitioner told her there was nothing he could do. She had a dysfunction in her spine that left her with no feeling from the waist down. Surgery, the doctor said, was not possible, but chiropractic therapy might help. The first chiropractor she saw made her feel better but didn't really turn the situation around. The second chiropractor made what Donadio calls "a phenomenal change" that allowed her to walk, function, and have fun—in short, resume a normal life.

Professional Disappointment

The experience redirected her career path, leading her from nursing to the study of chiropractic medicine at the Columbia Institute in New York, which at the time was affiliated with the New York Institute of Technology. After chiropractic school, she completed a master's of science in nutrition, followed by a PhD in education.

Yet despite all this education, she didn't understand the bigger picture of healthcare or wellness. "I did not understand how things worked together. Most people come out of schools—I'm certainly one of them—and don't know anything. I had memorized and regurgitated thousands and thousands of facts, but I did not organically understand what it was that I was supposed to be illuminating to the people who were coming into my practice. After a very deep soul searching, I felt like a bit of a fraud. I was just kind of staggering through, trying to understand all the minutia that I'd just memorized," Donadio recalls. This realization was disconcerting, but her confidence in what she calls her symptom-relieving skills convinced her that she still had something valuable to offer people.

A New Beginning

Donadio's direction was to change once again—this time as a result of happenstance or serendipity, depending on how one looks at it. When Donadio was opening her chiropractic practice in Boston, she became acquainted with David Hall, a minister who seemed to recognize her essentially intuitive understanding of healing. He appreciated her ability to understand healthcare from a larger perspective than that which merely addresses symptoms.

When Hall asked her to teach him what she knew, she laughed and replied, "What I know you could put into a thimble." When he insisted she had much to offer, she shrugged it off. At that time, she would pick up books after working with patients all day and try to gather a deeper understanding of the issues she saw in her practice. "I had an incredible thirst to understand how everything was connected to everything else—the cause and effect," she says.

Meanwhile, Hall was relentless—and ultimately successful—in his efforts to turn Donadio into a teacher. He offered to gather 10 willing students if she'd teach a class. "Look, David," she said, "no one is going to pay me money to teach them what I don't know, but if you can get 10 people, I'll teach the course." She was certain nothing would come of this, but roughly eight weeks later, she recalls, "Hall showed up at my office waving checks at me and said he had 10 people."

Thus began the NESWHE. Hall had gathered eager pupils peripherally involved in medicine, among them a food scientist, massage therapist, and psychiatric counselor. For the first year of the school, they would come twice per week to Donadio's practice office where she would give a tutorial. By the second year, word of mouth alone led 37 students to the budding program, leading her to hire three teachers. Without planning to, she'd devised a whole health model of education—an evidence-based, relationship-centered, whole-person approach to looking at health and healthcare. The program, she says, was a smashing success, and its growth, to her, was inexplicable.

In 1980, the Lemeul Shaddock Hospital in Massachusetts turned to the school for graduates who would intern at its pain and stress clinic, and for 10 years until the hospital lost its funding during the recession, the NESWHE's graduates would intern at the clinic, offering nutrition and stress counseling to patients. At the time, the program was chiefly nutrition-oriented. At this point, the school's emphasis widened to address the broader needs of the whole person. "We came to understand that we had to look at not only the physical component of a person's presentation but also the emotional, chemical, nutritional, environmental, and even spiritual factors, so in the late '80s, we went from a nutrition focus to a whole-person care orientation," Donadio says. The school began placing its graduates at the Massachusetts General Hospital, St. Elizabeth's Medical Center, and a variety of clinics and health and managed care centers.

Growing Support

In the mid-90s, the NESWHE received a call from Union Hospital, a Harvard-affiliate hospital on the north shore of Massachusetts, which had previously placed several of the school's nursing graduates and wanted to invite additional alumni. The hospital invited the school to present its program, and it was so enamored by the NESWHE's patient education model that it funded a private trial study from 1996 until 2002. Recalls Donadio, "It became very clear to the primary investigator as well as to other people involved that this was a powerful tool for transformation. The reason the nurses so embraced the program is because it transforms not only the relationship with the patient, it transforms the work environment—the relationship other professionals have with each other."

Donadio says that as the program moved from a strictly nutritionally oriented model to stressing the whole human being, it continued to recognize that a person's nutrition was interconnected to his or her sense of self and physical well-being, but it started looking further, asking more questions. It explored not only nutritional but other physical issues—such as disease processes, obesity, and exercise—and examined emotions as well. “We used Maslow's hierarchy as a model and used motivational interviewing techniques to discern some of the individuals' dynamics,” she explains. “We looked at environmental issues, which have a significant impact yet are typically underevaluated. We looked at the home, the work, the chemical, and the energetic environment of individuals. And we explored the internal or physical environment, which is genetic, and at the spiritual—the individuals' word views and values.” The model, she says, looks at the patient's relationship with the self, others, and the global community.

Communication and Interaction

One of the failures of the traditional model of health education, says Donadio, is that it tells patients what to do. “There isn't a human being alive that wants to be told what to do,” she notes. “In a way, that's being treated like a codependent or like a child. We tell children what to do; we don't tell adults what to do. When we start telling people what to do, when we start determining what is right for them and what they should do, we immediately undermine the most important components of motivation, which are self-sufficiency and independence.” That understanding informs the whole health model, which Donadio observes is completely respectful of “functionally interdependent but wholly independent human beings who can create for themselves their own models of health maintenance from what they know about themselves, what they're willing, inclined, and capable of doing for themselves.”

The whole health education approach is not merely centered on communication, which may imply a single mode and one-way direction of information. This model stresses interaction, respect, and mindfulness. In every encounter, says Donadio, “I am listening, hearing, seeing. I'm respecting, acknowledging, and witnessing who the person is—and that's a powerful experience.” Furthermore, she observes, traditional models put full stock in verbal communication, yet 70% to 80% of communication takes place nonverbally. “It takes place through the feeling people have from the way people look at them, the way they move, the way they make or don't make eye contact. We as human beings are very sensitive to what is truthfully in front of us, and we all know—because we've all been to doctors—when someone is listening to us. You know when someone sincerely and authentically cares about you.”

It's this reciprocal and comprehensive communication that patients crave and that the whole health model stresses—a fact underscored by research. Donadio points to a study that identified the four major questions to which patients want answers: Is anyone listening? Does anyone care? Are my symptoms explainable? What can I do to control my problem? The reason, she suggests, these questions so often go unanswered is that practitioners tend to be self-absorbed. “We go into practice thinking that it's about us, that we're there to heal the masses—to fix and instruct people—when in fact our primary job is to be present, to listen, and to communicate that we have information that individuals can choose to use in a way that they deem is organic, appropriate, and authentic for them,” she says.

Donadio observes that the model has traversed many medical areas and has been embraced by practitioners from a variety of disciplines, including physicians, nurses, social workers, and dietitians. “We work with healthcare providers who are in pain, unhappy, suffering, and no longer satisfied with the work that they once loved to do,” she says. “We're in a healthcare system today that is tragically flawed because of bottom-line economics. People go into healthcare with good hearts and good intentions, and what happens is the business of business—the business of healthcare then decompartmentalizes and distorts the work that they intended to do. Listening isn't important, time isn't important, and care is no longer the most important issue.”

The NESWHE is striving to create what it calls a renaissance of relationship-centered whole patient care by offering a model to healthcare providers, says its founder, that is not only healing and transformational for patients but for the healthcare profession as well. For more information, visit www.wholehealtheducation.com.

— **Kate Jackson is a staff writer for *Today's Dietitian*.**