## Module 3a:

# Feedback on observing and reflecting on how you recognize and manage emotions



By Ane Haaland, with Mwanamvua Boga

**To reference this content please use the following**: Haaland A, with Boga M, 2020. Communicating with awareness and emotional competence: introducing the iCARE-Haaland model for health professionals across cultures. With contributions from training teams, Vicki Marsh and Sassy Molyneux. <a href="https://connect.tghn.org/training/icare-haaland-model/">https://connect.tghn.org/training/icare-haaland-model/</a>

# **Background for trainer**

The purpose of this module is to give participants feedback from the analysis of their baselines and observation tasks, regarding being aware of and managing emotions related to interactions with patients, supervisors and themselves: These are the building blocks for Emotional Intelligence (EI).

Please refer to Module 2b, Feedback on Communication Skills, for how to analyze and report on the feedback from participants, how to build up this module, and how to run it.

You may decide to choose fewer examples than we have done in the text shown here – basically, the feedback module should take 20-25 minutes, max.

If you have many good examples, you can add them at the end for participants to read on their own.



Throughout this module, it is useful to refer to the two core modules: Basic communication skills, theory and practice (2c), and module 3b: Communicating with emotional competence – where many of the issues they have commented on here from their observations, will be dealt with.

The importance of respect as a major value has come out very clearly in the feedback from participants, and also the strong feelings related to being treated with disrespect.

The trainer should reaffirm that participants have clearly discovered that emotions influence how they communicate with others, and that emotions influence patients and parents strongly. Based on these insights, the trainer will help participants build emotional competence, consciously.

Another point to bring out where natural is – that these observations seem to have enabled them to see the situations from the perspective of the patients (e.g. recognizing and understanding the good reasons patients get angry), and consequently, showing empathy has been the provider's natural response. Furthermore, seeing their own role in establishing a relationship that helps the patient develop trust, and to open up to communicate well, has made them reflect – and see they can take an active role in facilitating good communication.

# Module 3: Understanding and handling emotions

The observation tasks have made participants reflect on their own role and has made them aware of and willing to question some of their own attitudes. This process is important to strengthen during the workshop, and it will also continue after the workshop.

Time: 20-25 minutes

# Presentation slides: Comments, questions, main points to bring out



Feedback from baselines and observation tasks

Recognizing and managing emotions:

# **Building emotional** competence

Basic skills workshop Ane Halaand, Hiza Davo. Mwanamvua Boga



Introduce the module in your own words. Thank them very much for their thoughtful work, contributions and reflections – and affirm that they are starting to build emotional competence.

Main points: The work they have done is very important, for them (they have learnt), and for us (we have used it to understand well what your issues and needs are, and to contribute to developing the contents of the course).

**Explain:** All the examples we have used are anonymous, and we have picked them to illustrate main trends/points in the answers.

# Referencing and acknowledging the iCARE-Haaland model

- Please feel free to use and adapt the material in this presentation, and the model it is built on, by referring to the model, and the authors
- This presentation is adapted from «Recognizing and managing emotions: Building emotional competence», which is part of the learning materials in the iCARE-Haaland model.
- To reference this content please use the following Haaland A with Boga M, 2020. Communicating with awareness and emotional competence: introducing the iCARE-Haaland model for health professionals across cultures. With contributions from training teams, Vicki Marsh and Sassy
  Molyneux. https://connect.tghn.org/training/icarehaaland-model/

The authors' names should remain on the presentation, with a by line recognizing the person who (has adapted and) is presenting the presentation

Please reference the materials you use from this module and the presentation in the way specified on the slide.

# Contents

- 1. Effects of communicating with and without respect
- 2. Feeling safe, or insecure, and effects on communication
- 3. Ways of handling conflict
- 4. What makes patients scared/angry
- What makes patients open up
- 6. Insights: Handling emotions

Summarize the main topics you will report on. **Remind** them that we gave them feedback on communication skills yesterday, so this is now focusing on issues relevant to a main topic in the training: Recognition and management of emotions - building emotional competence.

**Add** – that there will be another feedback session on research issues (if relevant).

**Introduce** each new section with a picture, to help participants sort the concepts and topics well.

The first topic is -

1. Effects of communicating with and without respect

# 1. Communicating with respect



# How do you communicate with a person whom you respect?

> I communicate with respect -25

(listen attentively/humbly/politely/calmly/Use good tone) "I communicate with low tone, respectful and humble myself"

"When communicating with a person I respect, I use words and language which portrays respect"

**Read out** the text on the slide - make brief introduction, e.g.:

The majority of you acknowledged that you communicate with respect, using different skills.

**Explain:** Deciding consciously that you will communicate with respect is an important start of using emotional competence.

(NOTE: The numbers refer to how many participants gave this answer)

# How do you react when you are treated with respect?

Feel good and appreciated/honored - 20

"I feel good and I pay more attention to the subject"

Feel good and want to reciprocate to others -3 "I feel good and honored and show respect also to the person who respects me"

Raises self esteem -2

"I feel good, appreciated and a high sense of self-esteem"

Read out the slide – introduce e.g.:

All of you expressed a sense of feeling good when treated with respect, and some felt inspired to reciprocate the same to others:

Respect inspires respect

# How do you react when you are not respected?

Pull back reactions: 12

(Withdrawn/Lack confidence/ Demoralized/Dishonored) "I feel someone has degraded me, despised me and feel really bad".

"I feel much lowered and not honored"

Read out the slide – introduce the opposite topic, e.g –

The feelings expressed as a reaction to not being respected, are strong ones.

> Act out reactions: 6

(Frustrated/Angry/Complain/Bad/Sorry)

"I feel angry, hot tempered; I can be rude, full of emotions"

# Are these reactions automatic or do you control them?

> Automatic -17

"There was a time we had a patient being nursed in the ward and he had very bad septic wounds and he had refused to being dressed for 5 days so I got angry and told him that he is going to die of the bad wounds."

➤ Control – 7

"I try to control the reactions once in amenity ward a relative left a very sick patient who could not do anything to self. At night the patient fell and injured his head. The relative was so cruel to me. I had to explain that I was all alone hence there was nothing I could have done hence I was sorry."

Read out the slide - introduce e.g -

Most of you have expressed that you react automatically when met with (what feels to you like) disrespect.

# 2. Feeling safe, or insecure? Effects on communication



#### **Introduce** the second topic:

2. Feeling safe, or insecure, and the effects on how you communicate

## In what situations do you feel safe?

> When respected/understood/valued/appreciated - 9

"I feel safe when one recognizes my effort and when none intimidate me"

"When I am trusted, and given positive feedback"

> Environment is conducive: No challenges, caring, friendly

"When people around are friendly and kind"

#### Others

When confident with what I am doing/Doing the right thing - 2

**Read out** the slide – introduce e.g. by saying:

All of you could identify situations where you feel safe.

# How do you communicate when you feel safe?

➤ Freely/with no fear/with confidence – 20

"I communicate freely with all my heart and mind when feeling happy to express my views"

➤ Listen/Open to give and receive information— 3

"I tend to listen to patients or others carefully so as to get what they want me to do for them."

➤I communicate well/humble/calm - 6

"I communicate well and humble"

Read the slide - introduce e.g. -

All of you say you communicate well when you feel

It is easier to use emotional competence when you feel safe.

# In which situations do you feel insecure or afraid when taking care of patients?

#### Handling very sick/dying /psychiatric patients 12

"When the general condition is very poor and I know no matter how much we try this particular patient will eventually die"

"When working on very sick children who are helpless I feel so sad for the child and this drains me all the energy"

### Handling Stubborn/Disrespectful/angry patients or caretakers - 4

"When the parents/guardians of the child are very anxious, stubborn"

"When a patient comes to me at the first contact and very furious and not seem not to appreciate/value what I am doina"

#### When in doubt - 3

"When what I am delivering might not be what they are expecting or when I am not certain of the results I am giving my patients"

#### Introduce e.g. -

These are the situations you identified where you felt afraid or insecure.

# How do you communicate when you feel insecure or afraid?

#### > Communicate with fear/very cautiously/hold back information 11

"Cautious, with restrictions, to avoid offending"

#### ➤ I communicate in a rude way/with no respect – 7

"Negative and rude. When if I feel insecure or afraid it makes me feel like a police officer"

"It demoralizes me and I attend to patients with no respect"

#### Lose confidence/use others -4

"I tend to loose my confidence. It affects me personally because one feels guilty of the bad or poor services rendered"

#### Others

➤ Communicate very fast/start blaming- 3

#### How do you behave when you are Overwhelmed? Fearful? Sorrowful? Angry?

### Angry

- Act out: 16 (irritable, shout at people, become destructive) ""When I am angry I tend to be bitter, raise my tone of voice to people and at time release my anger to the wrong people"
- Pull back: 6 (walk away, keep quiet and reflect, repress the anger)
  "I become very calm, being afraid of worsening the situation with my work"

#### Overwhelmed

- Act out: 4 (shout/blame others, get emotional outbursts)
  "I feel I need some attention and sometime shift blames, a patient died while a decision to give intravenous fluids was delayed"
- > Pull back: 3 (don't listen, loose interest, talk briefly, delegate)

#### Fearfu

Pull back - 6 (engage in group talk, address the cause)
"I choose to stay in a group that is talking of something not related to the issue causing fear. I go for music to provide direction of the issues causing fear."

#### Introduce e.g. -

All of you say it affects your communication negatively when you feel insecure.

It is difficult to use emotional competence when you feel insecure – but it can be learnt.

#### Introduce e.g.:

All of you recognize that these emotions affect you negatively, and need to be managed.

Being overwhelmed and feeling angry are the most commonly described reactions.

The two main responses are to act out/react to the situation in various ways, or to pull back from it – either by just leaving, or by taking action to communicate with someone about it.

**Ask** if they recognize these types of reflections **Get** some affirmations (e.g. by nodding, or saying they do recognize them), but don't let them comment.

Asking such questions is a way to keep your connection with the group – but not discuss.

# 3. Handling conflict





... Or evadina

#### Introduce the third topic:

### 3. Handling conflict

Handling conflict well requires emotional competence.

#### How do you handle conflict?

#### Confront - 8

"To date when there is conflict I try to ensure the other party To date when there is conflict itry to ensure the other party cools down then later confront to find where the problem is or address the problem. One day my wife was annoyed and started exchanging harsh words I went out of the house then came later when she was breast feeding and we talked calmly till use adults the see? till we solved the case

#### > Evade/Leave to others to take initiative - 9

"In cases of conflict, I usually like keeping off as I fear arguments"

#### > Act as mediators - 11

"Allow the two parties to cool down first, find out where the problem was, find a solution of which each one could know their weak and strong points after understanding that they come to an agreement and forgive each other and start afresh"

## Introduce e.g -

You describe two main ways of reacting when you are part of a conflict:

#### Confront, or evade

(read the examples)

Some of you describe how you take the role of the mediator when you are witnessing a conflict. You can continue to observe how you, yourself, act in a conflict.

#### What would you like to learn to handle conflict?

- > The majority (24) felt their way of handling conflict was not effective in reaching their goal. They want to learn:
- > How to handle conflict with care
- > How to effectively deal with my emotions when handling conflict (anger, fear.)
- > Improve on my communication skills
- > Effective strategies or techniques to handle conflicts

#### Read out the slide -

Emphasize that conflict is a normal thing in life, and that almost all of them feel they do not have an effective way of handling conflict.

State their learning goals, and inform them that there is a module in the workshop dealing with conflict, so these issues will be discussed. There is another module in the follow-up workshop, to deepen the learning on this important issue. Both these modules focus on learning emotional competence.

# 4. What makes patients angry?



**Introduce** in your own words the next topic:

# 4. What makes patients angry?

#### What makes patients angry?

#### > Delays or poor service delivery - 15

"Mainly delays in service delivery and sarcastic/abusive language by health care providers"

#### > When disrespected/Ignored/Shouted at - 6

"Disrespecting or shouting at them, leaving them

#### > Issues about sample taking (drawing blood/LP etc) 2

"Some investigations that needs bleeding of children i.e. bleeding to remove blood"

#### Inadequate information/no feedback 2

Introduce e.g.

You have identified and reflected on many good reasons patients are angry.

## After reading the slide – ask:

You seem to have acknowledged that these are good reasons for being angry, seen from the patients' perspectives?

**Get** confirmations, and/or brief comments Ask: Does this insight influence your ability to listen to and show empathy to angry patients? Get brief comments – and confirm that you will discuss HOW to do this, in the next module, 3b.

#### How do you handle an angry patient/parent?

#### Using communication skills and emotional support – 23

"In the above situation at first the parent had a lot of fear since the whole night she had had no sleep since the baby was sick and did not sleep and so she came early for her child to be attended. I welcomed the mother calmed her down by showing respect and understanding of her situation assisted her by examining the baby then explained to her the importance of cleaning and morning preparations

#### Not able to handle angry patient – 3

"A father who was harsh and abused me because his child died, I tried to cool him down but instead he became more furious and I also became angry and told him off"

#### Introduce e.g. -

You describe how you use your skills to handle the situations well. This is an example of using emotional competence.

Some of you also find it a challenge to handle such patients. We will deal with this topic in the next module.

## How did you feel about your efforts to calm down the angry patient/parent

#### Those who managed to calm patients - 21

Felt good/ happy/satisfied/sense of achievement or accomplishment/efforts fruitful

"I felt good and satisfied, after all the client was calm and got

# Those who did not manage to calm patients - 3

> Felt frustrated/bad 3

"A difficult situation which frustrated me very much"

> Worked up/tensed and bored -2

... and you also say handling emotions well gives you good satisfaction.

When learning to use emotional competence consciously, you will discover you often feel satisfied with your efforts.

# 5. What makes patients open up and give information?



**Introduce** in your own words the next topic:

What makes patients open up and give information?

# What makes patients open up and give you the information you need, without fear?

#### Patients open up when valued, Treated in a friendly manner/ respected/appreciated/listened to and shown empathy – 16

"Trust and being valued is the key to gathering information from clients, this is achieved by giving a warm welcome and showing concern"

"What will make patients to open up and give you information you need is when one is friendly, warm and kind to them making them to trust you and feel that you are concerned about them"

#### When assured of confidentiality/privacy ensured - 8

"Reassurance and assuring confidentiality of the information given. Active listening to the patient. These usually allay fear of any kind and can make patient open up"

#### Introduce e.g. -

You are describing a number of good communication methods you use to obtain good information from patients.

These examples show how you are starting to use emotional competence.

# 6. Insights on managing emotions







# Introduce in your own words the last topic:

#### 6. Insights on managing emotions

**Emphasize** the need for developing awareness, using the antennae to recognize emotions and step back from automatic reactions (e.g. to anger), and note that this is what many of them have said they actually do.

Then read out the insights

## Insights: Managing anger

"Anger causes anxiety, headaches and even high blood pressure that threaten our health. Anger can trigger fights and abuse. With the reflection and observation I am made to understand anger affects our day to day life negatively more so in health provision. Well managed anger can be useful at work, social places and at home. This has motivated me to make a positive change. To control my anger I have learnt to recognize and accept emotion as part of life. I believe every problem has a remedy to control it rather than uncontrolled

"It doesn't matter how hurt we are. Approaching the other person in a calm manner and with respect can help solve the problem. We should stop thinking of the person who irritates us and focus on way forward to solving the problem. We always need change immediately when angered but it's good to have self control otherwise the end could be destructive"

#### Read the slide

These examples show you are starting to use emotional competence.

# Insights: managing anger (2)

"Surely anger can be automatic as defensive mechanism, but I've been made to understand that it can be controlled. At times I could become mad with everything that upsets me, but now I have realized that my negative impact on the other party hence leading to not achieving/gaining any better solution to a problem"

"I have learned dealing with irritation and anger is very interesting. The small and big situations which bring irritations/anger and later conflicts are normal and are daily issues of our today's life, but how one handles them matters a lot. Irritations and anger can spoil ones entire life when handled without understanding and can also bring a positive solution when handled with understanding. This is great"

#### Read the slide

These examples also show using emotional competence.

# Insights: Blame does not solve it

✓ "I discovered that even if you blame, it doesn't reverse the situation."



- "I have come to realize that big reactions are never helpful and do not solve problems promptly as if one takes too long to calm down after a reaction, time is wasted and the problem grows larger and larger."
- ✓ "And sometimes when one tries to solve a problem before the tempers are over I have realized that no solutions are achieved because temperature or grief is still high and it might cause a danger to self or whoever is assisted."

**Read** the slide – ask if they recognize these types of reflections

**Get** some affirmations (e.g. by nodding, or saying they do recognize them), but don't let them comment

Asking such questions is a way to keep your connection with the group.

#### Insights: I am part of the conflict!

- ✓ "I have discovered that I am part of the conflicts which arise from the way I react to questions and comments which come my way. Also how people behave towards me. My judge is too quick at bringing out from my mind the negative side of the situation or statements the always wondered why people react badly towards me and I've now got the answer. Am too cautious with the statements. I now need to digest the message, read inner meaning, then think of the answer and the repercussions of what I want to say and do before deliver my actions or statements"
- √ "I have observed that am susceptible to anger. I don't
  digest and analyze the information or reaction first before I
  make a comment or conclude my next step of action"

### Read the slide

When you discover and reflect on effects of your communication, you are starting to develop emotional competence.

#### Conclusion

Have we captured the main issues?



**Ask** if participants feel we have captured the main issues from their observations and reflections, on dealing with emotions.

Let them discuss briefly at the tables
Get brief comments, and/or suggestions
Affirm that they are starting to use emotional
competence, and that we will learn more about how
to practice these essential skills.

Close the session.