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## Communicating with Children

### Soft-skills in communicating with children: Observation and Listening

#### Observation

The art of communication requires not only verbal skills but also observational skills (e.g., interpreting body language). The ability to observe allows a more real understanding of the sent message, of the interlocutor's emotional status. Therefore, observation has two important indicators: the non-verbal behavior (mimic, gestures, voice, vegetative changes) and verbal behavior (the content of the messages).

#### Listening

Time is a very precious commodity for all healthcare providers, and it can be tempting to try to save time by making patient interactions short. However, this often results in miscommunication and patient dissatisfaction that actually can result in spending even more time. To demonstrate good listening skills, pediatricians can:

- **Begin by inviting the patient or parent to tell you the story** of themselves or of the disease, e.g.: "Joey, tell me about yourself and the problem that brings you here today? Show that you are listening by simply saying it: "I'm listening." "I understand." "Got it. Please go on."
- **Use nonverbal signs such as nodding, leaning forward or offering a gentle "hmm" or "uh-huh."**
- **Avoid looking at the watch.** Do not do anything to suggest that you are in a hurry to leave.
- **Use open-ended questions followed by directed and more specific questions** as needed. Some patients need more direction than others, but too much direction or direction too early in the conversation can prevent the patient or parent from telling his or her story and can be misleading.
- Platt and Gordon (2004) point out that **validation** is a critical part of listening. It means explaining to the patient how you interpret what he or she told you and modifying that interpretation if the patient sees it differently. "Let me make sure that I have it right. You were angry because you felt the medicine was actually making the pain worse, but no one would listen."
- Use **Reflection**. This technique involves repeating a significant word or phrase that the patient has just said. It is particularly useful when a patient has talked about his or her feelings. It is a safe technique in that you are not offering an interpretation; you are simply indicating that you heard what the patient said and perhaps are inviting him or her to elaborate on it.
- Use **Clarification**: clarifying is a higher skill level than reflecting. It means rewording or defining what the patient has said. Clarifying can help patients or parents to recognize and understand their feelings.



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