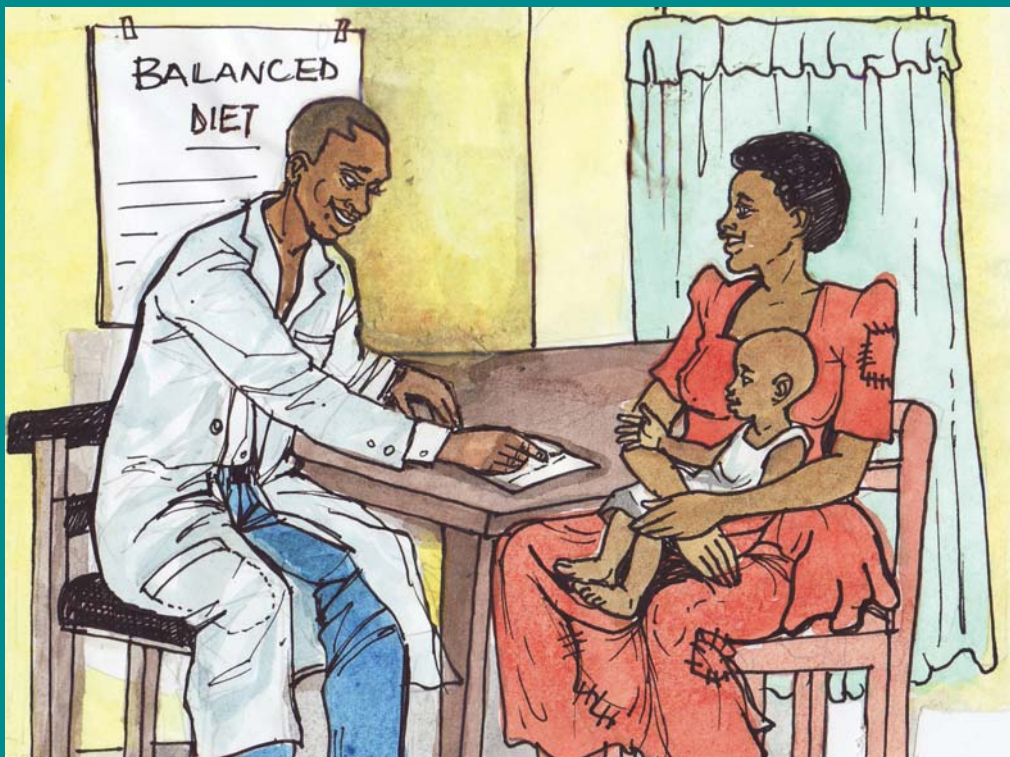


Improving Interactions With Patients

Part Two



- Asking Good Questions
- Giving Good Information

The ACT PRIME Study

Infectious Disease Research Collaboration, Uganda.
ACT Consortium, London School of Hygiene & Tropical Medicine, UK.



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INTRODUCTION TO THE MANUAL

Before we start...

Welcome to the Learner Manual for the module entitled – Improving Interactions with Patients Part 2.

We are very glad to have you as one of the first set of health workers to participate in this important training.

Everything you will need during the course and as a reference is included in this manual. In addition, there are notes and explanations included in the manual for you to refer back to at a later point.

The trainer will guide you on when to use the manual. Please focus on the trainer when she is talking and focus on the manual exercises when the trainer has guided you to a specific page, which needs your attention. The additional resources in the manuals are for your future reference.

Thank you for participating fully in this training and for respecting your fellow colleagues. Each one of you is unique and each one of you learns at a different pace. The trainer will take great care to cater to all your needs in order to make the training a success. Thank you in advance for doing your part to make it a valuable learning experience.

How to use this manual...

Throughout this manual, you will come across certain re-occurring symbols and boxes. These highlight certain key aspects for learning or contain information, which will help you during or after the training. The following is an explanation of these symbols.

Icons & symbols

Purpose:

Learning Outcomes:

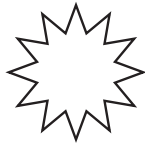
PURPOSE & LEARNING OUTCOMES

This coloured box can be found at the start of each main topic section. In this box you will find the **PURPOSE** of the Topic and the key **LEARNING OUTCOMES** for that Topic.



KEY QUESTION

This symbol can be found when a **KEY QUESTION** is being asked.



DEFINITION or KEY LEARNING POINT

This symbol represents a **DEFINITION** or a **KEY LEARNING POINT** to be remembered.



GROUP WORK

This symbol represents **GROUP WORK**. The training is interactive and a significant amount of your time will be spent in **GROUP WORK**. This symbol indicates that the activity will be done in a group. This means that you need to be a team player and allow all members of your group to participate equally.



WORK IN PAIRS

This symbol represents **WORK IN PAIRS**. This will be an opportunity for you to work one to one with a colleague. Pair work could mean buzzing or role playing, interviewing or problem solving. Be sure that each person in the pair gets a chance.



SUMMARY

This symbol will be shown where you can find a **SUMMARY** box – you can review these summary points at home or before the next training and in the future.



SELF-OBSERVATION ACTIVITY

This mascot symbol will be shown where there is a **SELF-OBSERVATION ACTIVITY** and some guidelines for you to follow.

Your Notes:

NOTES

This represents a space for your **NOTES**. Feel free to write your comments and questions and anything that you do not understand in these spaces and discuss it with your trainer before, during or after a training.

What are you going to learn...

From October 2009 until February 2010, the Uganda Malaria Surveillance Project / Infectious Disease Research Collaboration conducted research activities in Tororo District. The researchers spoke with households, health workers and community medicine distributors, and talked to groups of community members and health workers to learn more about how health care is provided to sick children in this area, especially at health centres.

During this research, community members told us that they do not always feel able to give the health worker information on their symptoms due to language barriers, time restraints during the consultation, or anxiety about interacting with health workers. For example, not all patients speak English and as a result, they are unable to communicate with health workers who many not know the local language. Patients are hesitant to go to a health centre where they will not be able to communicate their symptoms and understand treatment information and instructions. In addition, community members also told us that the care and treatment received at the health centre does not always cure their illness, but they believe that clinical care and treatment can be improved if health workers follow through the care process of diagnosis, treatment and referral, if required.

Health workers described similar frustrations when treating patients. They told us that patients do not provide full information on their symptoms, previous medications they have taken, or other important information. As a result, health workers are not able to treat the patient fully. Getting and giving information on symptoms, diagnoses, treatment and follow-up, and treating illnesses correctly were felt to be important to ensure that patients received good clinical care.

The purpose of the training in Patient Centred Services (PCS) is to identify and improve interpersonal interactions between health workers and patients. The PCS module training will reach all clinical staff and health centre support staff.

The PCS training includes the following modules:

- **PCS 00** – Introduction to Patient Centred Services
- **PCS 01** – Improving interactions with patients, Part 1
- **PCS 02** – Improving interactions with patients, Part 2
- **PCS 03** – Building a positive work environment
- **PCS 04** – Improving the patient visit
- **PCS 05** – Volunteers: Improving the patient visit

This module will introduce you, as health workers, to two new communication skills: Asking Good Questions and Giving Good Advice and Information to Patients.

The **key learning outcomes** for PCS 02 are:

Topic	Learning Outcomes By the end of this module, you will be able to...
Asking good questions	<ul style="list-style-type: none">• Understand the importance of getting good information.• Be aware of the way and consequences of how they ask questions.• Know how to formulate open questions.• Ask questions without showing judgement.
Giving good information	<ul style="list-style-type: none">• Understand the importance of giving good information.• Be aware of the way and consequences of how they give information.• Know how to give good information to patients.• Understand how to empower patients to follow advice.

TRAINING AGENDA

This module will last 3¼ hours from start to finish.

Today's training will start at ____:____ Today's training will end by ____:____

Topics	Total time
Introduction to the module - Greetings & Review - Training rationale and Learning outcomes	15 minutes
TOPIC 1: Asking good questions - Introduction to the topic - Thinking about the topic - Principles - Practice - Discussion - Planning	70 minutes
Break	30 minutes
TOPIC 2: Giving Good Information - Introduction to the topic - Thinking about the topic - Principles - Practice - Discussion - Planning	60 minutes
Self-Observation Activity # 3 - Introduction - Instructions for Self-Observation # 3	15 minutes
Conclusion	5 minutes
TOTAL	195 minutes = 3 hours 15 minutes

INTRODUCTION TO THE MODULE

Purpose: To welcome and orient you to the training and help you to understand what you can expect of the training and what will be expected of you as participants.

Learning Outcomes: By the end of this session, you will:

- 1) Know the names of co-participants.
- 2) Know the name of the training leader.
- 3) Review and accept a set of ground rules for the training.
- 4) Review the previous module's key learning points.
- 5) Know the learning outcomes and purpose of the module.

1. Greetings

Name of Trainer:

Names of co-participants: *complete if you wish*

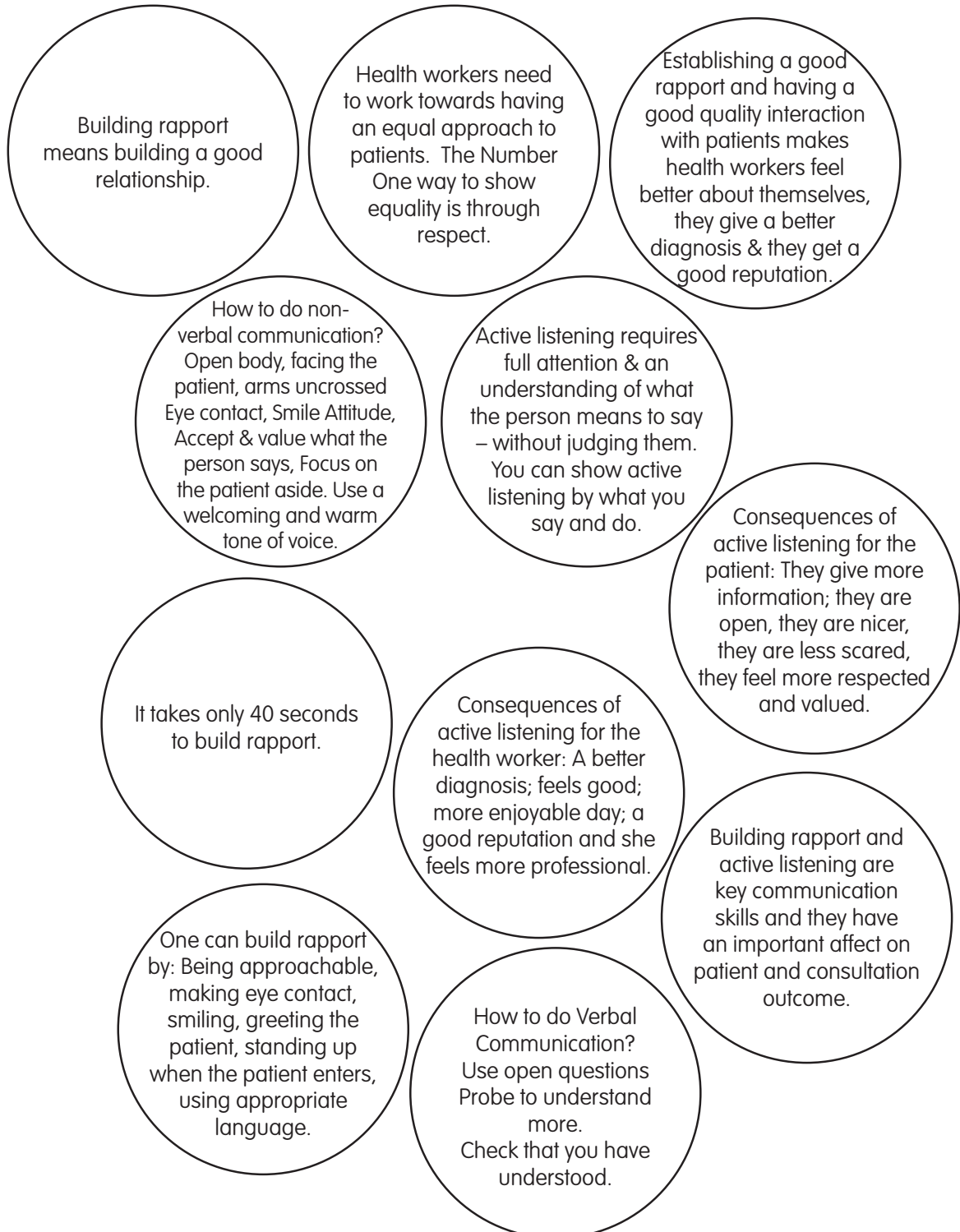
Ground Rules: *that will support the learning of all participants*

Please write the ground rules agreed on by the group below:

Review Circles

Guide: This is an opportunity to review the learning outcomes from the previous module.

Some participants will read out a summary point in one of the circles. You can use whatever kind of voice you wish – for example a loud voice, a singing voice. Be sure to speak clearly.



2. Training rationale and learning outcomes

The communication skills' training to improve interactions with patients is divided into two sections and will be carried out over two modules:

- PCS 01
 - Building rapport
 - Active listening
- PCS 02
 - Asking good questions
 - Giving good information

For this module you will be concentrating on the second of these set of skills. You will be asked to share your experiences and reflections from your self-observation activities.

The **key learning outcomes** for PCS 02 are as follows:

Box 1: Learning Outcomes.

Topic	Learning Outcomes By the end of this module, you will be able to...
Asking good questions	<ul style="list-style-type: none"> • Understand the importance of getting good information. • Be aware of the way and consequences of how they ask questions. • Know how to formulate open questions. • Ask questions without showing judgement.
Giving good information	<ul style="list-style-type: none"> • Understand the importance of giving good information. • Be aware of the way and consequences of how they give information. • Know how to give good information to patients. • Understand how to empower patients to follow advice.

Your Notes:

TOPIC 1: ASKING GOOD QUESTIONS

Purpose: To introduce the key communication skill of asking good questions.

Learning Outcomes: By the end of this session, you will:

- 1) Understand the importance of getting good information.
- 2) Be aware of the way and consequences of how they ask questions.
- 3) Know how to formulate open questions.
- 4) Ask questions without showing judgement.

1. Introduction to the topic

In the introductory module to Patient Centred Services (PCS 00), you discovered that you can help patients to feel better much more easily if you really understand their problems. This module will address how you ask questions of your patients, and what techniques you can use to ensure that you are effective in letting them know that you really are interested in what they have to say.



At the last workshop you were asked to carry out Self-Observation Activity 2: 'How do you ask good questions?' How did it go overall?

Your Notes:

ACTIVITY A – Self-Observation Activity Discussion

Guide: In groups of 3 – 4 answer the following questions and if you wish, write your responses in the space provided. Remind participants to give constructive feedback to their colleagues.

Encourage the groups to appoint a note taker who will give feedback to the wider group if there is time.

Topic 1: Asking Good Questions



Question 1

What did you observe this week about how you asked questions of your colleagues?

- *What were the effects or results of these ways of asking questions?*

After 2 minutes, move to question 2.

Your Notes



Question 2

What did you observe this week about how you asked questions to patients?

- *What were the effects or results of these ways of asking questions?*

After 2 minutes, move to question 2.

Your Notes



Question 3

What did you learn this week about being aware?

- *Did you ask questions automatically or with awareness?*
- *Did you notice a pattern in the way you ask questions?*

After 2 minutes, move to question 2.

Your Notes



Question 4

What changes did you decide to make?

Your Notes

2. Thinking about the Topic



Think about when you have had a long queue of patients outside and it is nearly time to go for lunch. How do you listen to patients then?

Guide: On your own, take 2- 3 minutes to reflect and write down 2-3 things you notice about the way you pose questions to a patient.

Your Notes

3. Principles

- When you think about doing your job well, you may think mostly about diagnosing and treating patients' illnesses. In order to do this, you require patients to give you good information.
- But when patients come to the health centre, there are many reasons why they do not, or cannot, give you good information.
- One reason may be that you are not asking questions that allow you to get information in a neutral way, without making patients feel nervous, scared, upset, shy, apprehensive, or rushed.
- If you become aware about the way that you are asking questions, you can try to see how to make changes in what you do.
 - Research observations have shown that people who communicate well:
 - Ask more questions than others.
 - Ask open-ended questions.
 - Ask about the other person's ideas & feelings.

Topic 1: Asking Good Questions



Learning Point

People who communicate well try to understand the other person's experience and perspective, before they give their own ideas or opinions. To do this, you need to think carefully about how you ask questions.

Closed and Open Questions

Guide: After looking at the following two questions, which type of question do you think will give a lot of information, and which will give only a little information? Write 'a lot' or 'a little' in the box to the right of the questions below.

Question	A lot or a little bit of information?
1. Did you enjoy your last weekend off?	
2. What did you do on your last weekend off that made it enjoyable?	



Which question gave the most information, and why?

Your Notes



Learning Point

You can divide most questions into two types: closed questions and open questions.



What kinds of answers are given to a closed question?

Your Notes



Learning Point

- **Closed questions** are also called 'leading questions' or 'direct questions', and give a restricted or closed response.
- **Closed questions** are usually answered by 'yes' or 'no', how much of something (numbers), etc.
- **Closed questions** give little information, and often (but not always) wrong information.
- **Closed questions** are often asked to confirm the idea or opinion of the person asking the question.



What kinds of answers are given to an open question?

Your Notes



Learning Point

- Open questions ask the person to describe something, and there is no 'right' or 'wrong' answer.
- Open questions are open to finding out something that you may not have expected.



Can you answer the following questions by marking with a ✓ if these questions are open or closed.

- | | | |
|--|----------------------------|------------------------------|
| • Do you like this training module? | <input type="radio"/> OPEN | <input type="radio"/> CLOSED |
| • What do you think about using role plays in training? | <input type="radio"/> OPEN | <input type="radio"/> CLOSED |
| • Do you agree these methods are good for learning communication skills? | <input type="radio"/> OPEN | <input type="radio"/> CLOSED |
| • How many times did you get malaria last year? | <input type="radio"/> OPEN | <input type="radio"/> CLOSED |

Topic 1: Asking Good Questions

- How do you feel about taking these medicines?
- Please can you tell me about anything else that is troubling you today?

OPEN	CLOSED
OPEN	CLOSED



How do open questions start – what words are used when we ask an open question?

Your Notes



Learning Point

Open questions often start with:

- What... How... In what way...
- Where... From where ... Who... From whom ... When...
- Please give an example ... Please say something more about this ...

These questions are usually felt by the patient to be neutral on the part of the person asking. They ask the patient to describe a symptom, experience, outcome, etc. But, the person asking is not showing their expectation or judgment.

It is also important to ask questions in a warm and inviting tone of voice. Even a neutral question may feel challenging if you use an unfriendly or sharp tone of voice.

Remember – people will respond more to the nonverbal sign (that is, your tone of voice) than to the verbal – that is, the words you use!



Guide: You can read out the following questions and the group can discuss how these questions can be rephrased to be open questions.

CLOSED QUESTION	REPHRASED QUESTION
<ul style="list-style-type: none"> Do you agree that you will use bed nets every night now? 	
<ul style="list-style-type: none"> Why did you come to the health centre with your child already so ill? 	
<ul style="list-style-type: none"> Have you understood the instructions I gave you about taking these drugs? 	
<ul style="list-style-type: none"> Does your child have a fever? 	

4. Practice

Activity B: Role Play about 'open questions'



Guide: In groups of 3's carry out this role play outlined below. Repeat the role play twice and give feedback to the health worker at the end of each role play. Remember to provide constructive feedback.

Roles

- 1) **Observer:** Watch the interaction between the patient and the health worker and give feedback on how the skills were put into use. Remind participants about the ground rules and providing constructive feedback.
- 2) **Health Worker:** Ask questions to the patient to get as much information as possible.
- 3) **Patient:** You have brought your sick child to the health worker. Answer the health workers' questions about your child's illness. Remember that you are worried about your child and are nervous about talking to the health worker. Use the answers on the scenario card to answer the health worker, but remember to answer 'closed questions' with 'yes' or 'no' answers and, for this exercise, only provide as much information as asked by the health worker.

5. Discussion

Follow up on role play



What was the information like, which you received from the patient when you asked open questions?

Your Notes



What was the benefit of asking open questions compared to closed questions?

Your Notes



How will asking good questions improve your consultations and interactions with patients?

Your Notes



Learning Point

- It is very important to ask good questions in order to get good information from patients. But sometimes, it may seem like patients will talk for a long time if given the opportunity.
- Research has found that people only talk for about 92 seconds (less than 2 minutes!) when they are given the time to talk using an open question.
- This means that you can get a lot of good information in a short period of time if you ask good questions!

6. Planning

ACTIVITY C – Planning Discussion



Guide: In groups of 3 -4 use the activity sheet below to help you to make a plan on how to ask good questions to your patients. You will have approximately 10 minutes for this exercise. One or two groups will feedback to the larger group.

Activity Sheet – Planning how to use open questions

1) How will I remember to use my asking 'open questions' skills?

2) How will I know if I am using my asking 'open questions' skills?

3) Who can help me practice and give me feedback on my asking 'open questions' skills to see if I am on-track?



Summary Box – Asking Good Questions

For reference for learners

- Doing a good job as a health worker requires diagnosing and treating. To do this well requires good information from the patient.
- We must ask questions in a neutral way - without making patients feel nervous, scared, upset, shy, apprehensive, or rushed.
 - Closed questions are also called 'leading questions' or 'direct questions', and give a restricted or closed response.
 - Closed questions are usually answered by 'yes' or 'no', how much of something (numbers), etc.
 - Open questions ask the person to describe something, and there is no 'right' or 'wrong' answer.
 - Open questions are open to finding out something that you may not have expected.
- To ask good questions, you must become aware, or conscious, of how you are communicating.
- Open questions usually start with:
 - What... How... In what way...
 - Where... From where ... Who... From whom ... When...
 - Please give an example ... Please say something more about this ...

TOPIC 2: GIVING GOOD INFORMATION

Purpose: To introduce the key communication skill of giving good information.

Learning Outcomes: By the end of this session, you will:

- 1) Understand the importance of giving good information.
- 2) Be aware of the way and consequences of how they give information.
- 3) Know how to give good information to patients.
- 4) Understand how to empower patients to follow advice.

1. Introduction to the topic

- You have learned about how to get good information from patients. You now need to also think about how you will give good information to patients.
- If you know what your patient's real problems are and how these relate to their health, you will be able to give advice that makes sense to them and that they can follow in their day to day lives.



What information do you think is 'good information' that you should give to patients?

Your Notes



Learning Point

How we provide this information to patients is the key to providing good information and patient centred services.

Topic 2: Giving Good Information

2. Thinking about the topic

ACTIVITY D – Demonstration: ‘Bad’ information

Guide: Your trainer will demonstrate one way of giving information to a patient and you need to evaluate the way ‘the health worker’ in the demonstration, interacted with the caregiver.



What was missing or unhelpful in the way the health worker, interacted with the patient?

Your Notes



What were the consequences for the patient?

Your Notes

3. Principles

ACTIVITY E – Demonstration: ‘Good’ information



Guide: Your trainer will demonstrate one way of giving information to a patient and you need to evaluate the way ‘the health worker’ in the demonstration, interacted with the caregiver.



What did you observe the health worker doing as she gave information to the mother?

Your Notes

Topic 2: Giving Good Information



Learning Point

- When giving good information to patients, you need to be sure that it is appropriate for the diagnosis you have made but also that it is appropriate for the patient's situation.
- You also need to be sure that you are giving information in a way that is friendly, calm and approachable – and to be sure that the patient understands the information and advice you are giving.
- When you give information in a closed way, with an unfriendly attitude, it can appear that you are 'blaming the patient' for their illness, and leaving the responsibility with them to take the action that you have prescribed.
- Giving information that is appropriate for the patients' situation requires that you know whether the treatment or suggestion is possible for that patient. This requires the patient to tell you. To give useful information, you need to encourage patients to talk openly with you. This is called 'empowering the patient.'
- 'Empowering the patient' means allowing, or enabling the patient to understand the diagnosis and treatment, giving the patient confidence to return to health centre, and encouraging the patient to prevent illness in the future.



Guide: You can find other examples of scenarios of giving information at the end of this module. You can read and complete these exercises at home.

4. Practice

ACTIVITY F – Role play – RDT positive fever



Guide: In groups of 3's carry out this role play.

There are three roles in this role play:

One person is the health worker, one person is the patient, and one person is the observer.

Follow the ideas for giving good information that were written on the flip chart earlier and try to avoid the characteristics from the first demonstration of giving 'bad' information.

Repeat the role play twice and give feedback to the health worker at the end of each role play. Remember to provide constructive feedback.

Roles

Observer: Watch the interaction between the patient and the health worker and give feedback on how the skills were put into use.

Health worker: You have completed the RDT and the result is 'positive'.

Patients: You are an adult patient with fever. Listen to the information the health worker gives you. Make a note to yourself about how much you understand from the health worker's explanation. Ask questions only if you are asked to by the health worker.

5. Discussion

Role Play Feedback

Health worker



How did you manage to give good information to the patients? How did it feel to you, to give good information, and why do you think this made you feel like that? What did you find difficult about giving good information?

Your Notes

Patient feedback



How did you feel as the patient? Did you feel that all of your questions were answered? What did the health worker do that you particularly liked?

Your Notes

Observer feedback



How did the health worker's behaviour relate to what you usually see at health centres? Did you see anything that could still be improved – in what way?

Your Notes



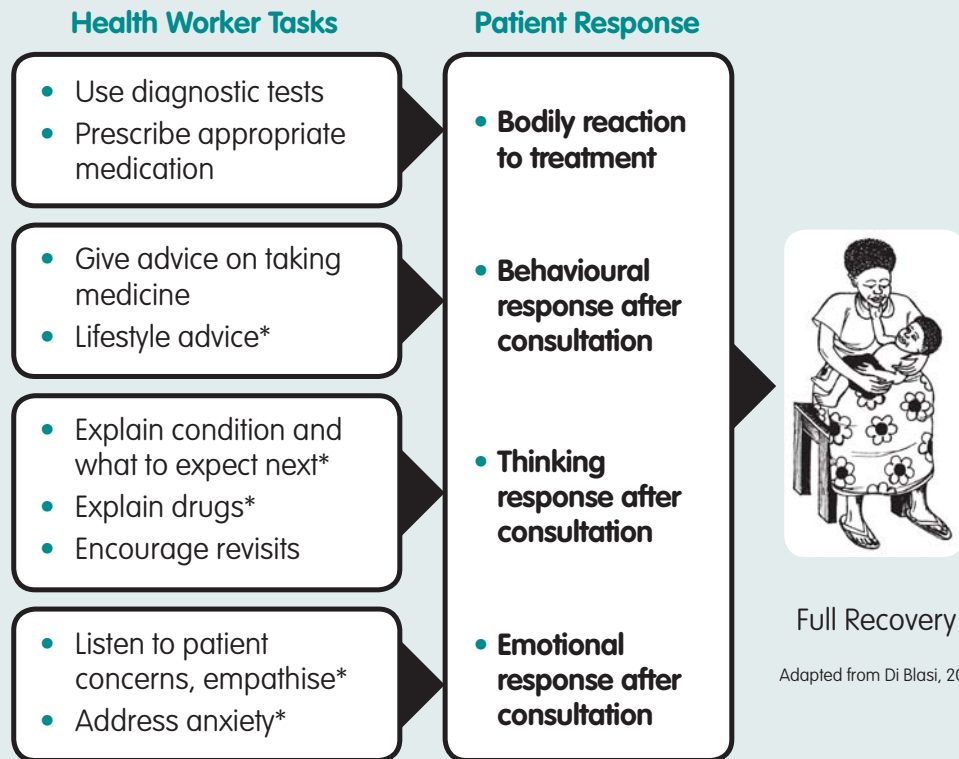
Learning Point

Your role as health worker goes beyond providing medicines.

If you want to help the health of the patient as a 'whole person,' you also have to think about what is important to them in what they do (behaviour), think and how they feel.

Guide: Review the diagram below from the Introduction to Patient Centre Services (PCS 00) module.

Figure 2: Providing total patient centred care



* highlights aspects of care that really require the health workers to provide care in the context of the patient's life by considering the patient's values, beliefs, history, needs, abilities, culture and social network

Topic 2: Giving Good Information



Learning Point

Remember that addressing these other aspects of your patients' problems means you need to listen actively, ask good questions, and give good information.

6. Planning



Guide: In your groups with others from your health centre, discuss your own opinions about giving 'good' information using the questions below as a guide. If you wish, write your ideas in the space below.



How does providing good information relate to what you do now in your health facility?

Your Notes



What changes would you like to make at your health facility after today's training?

Your Notes



What impact do you think these changes will make?

Your Notes



How will you ensure that you continue to give good information in the future, a long time after this course?

Your Notes



Summary Box – Giving Good Information

For reference for learners

- A patient centred service requires the health worker to provide good information to patients.

Good information – that the patient needs in order to understand his or her illness and treat it well includes:

- What the diagnosis of the illness is.
- What the treatment for the illness involves.
- How to take the medicine prescribed.
- How to prevent the illness in the future.
- When to return to the health centre if no improvement.
- What to expect with the illness (recovery period).
- Giving good information to patients must be done in a way that is friendly, calm and approachable – the health worker must be sure that the patient understands the information and advice being given.
- When a health worker gives information that helps to address both the disease that was diagnosed and the disease that was causing fear for the patient – she is using the ‘Empowering the patients’ method of information giving.
- This method makes sure that the patient is being treated as a whole person.

SELF-OBSERVATION ACTIVITY #3: PREPARATION

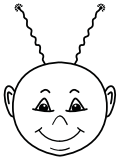
Purpose: Introduce and review the self-observation activity.

Learning Outcomes: By the end of this session, you will:

- 1) Strengthen your skills in self-reflection.
- 2) Understand the self-observation activity steps planned for the next week.

1. Introduction

- Over the last two weeks you have looked at how you listen and how you ask good questions of colleagues and patients.
- The next self-observation exercise will focus on how being stressed influences you and your communication with patients and colleagues and how you can overcome the affect of stress on yourself and your patients.



WHAT HAPPENS WHEN YOU ARE STRESSED?

1. Introduction

Over the last two weeks you have looked at how you listen and how you ask good questions of colleagues and patients. You may also already have made some changes in the way you use these skills.

We hope that you are getting used to learning about your communication style and discussing what you have learned with your colleagues, and that some serious learning is taking place. We also hope that you are having some fun when seeing the 'strange' things you and others may do and say. We laugh at our experiences in our PCS training modules, and it is good to laugh with your colleagues about your experiences at work. Humour can be very motivating, and can help people see the point – and thus help them learn. However, humour can also hurt people and make them 'turn off', so you need to be aware of how you use it. Be sure that you are 'being constructive' and laugh at yourself or laugh WITH THEM – do NOT try to be 'funny' or sarcastic on their behalf!

If learning is only serious, some people lose interest. A mixture of serious insights and some fun and laughter will bring you the best results when learning new skills.

2. Stress and how it affects you

This week we will focus on how being stressed influences you and your communication with patients and colleagues. Humour is a good method to prevent stress!

Stress is normal and will continue to come into your life from time to time. Being a health worker can be very stressful at times and many people are very unhappy and even get sick from too much stress. Stress can lead to conflicts with colleagues and patients and can make a health worker make wrong decisions that affect patients. If the stress is not taken care of, it can contribute to burnout and a number of other problems.

3. Instructions

There are 4 Steps for this self-observation activity which you can complete over this week as follows:



- | | |
|---|----------|
| Step 1 – What makes you stressed? | 2-3 days |
| Step 2 – How do you communicate when you are stressed? | 2-3 days |
| Step 3 – How does your stress affect others? | 1-2 days |
| Step 4 – Your stress-reaction pattern | 1-2 days |



Complete Steps 1 and 2 together over the first 2-3 days.

Step 1: What makes you stressed?

On your first day of this self-observation activity, start thinking about and make notes in your book about the following questions:

- What is stress?
- How do you know when you are stressed?
- What are the 'symptoms' of stress?

Then for the first 2-3 days, pay attention to **what makes you stressed**.

While doing this, add to the notes about symptoms of stress: These may only become clear to you when you are in the stressful situation.

When something happens that stresses you, make notes in your notebook:

- What was it that made you stressed?
- How did you react?
- Why did you react?

These can be issues related to your relationship with your colleagues or boss, with your patients, or with your daily duties. Or it can be a combination.



Step 2: How do you communicate when you are stressed?

After you have found out a few things that stress you, start to look at **how you communicate when you are stressed**.

Each time you feel stressed, take a minute to look at yourself and see if you:

- Listen well?
- Ask questions? What kind of questions do you ask?
- Take control/talk a lot?
- Tell people what to do?
- Use a strict/non-friendly tone of voice?
- Seek assistance?
- What else do you do?

Make notes in your notebook about the **effect** of stress on how you communicate with others.

After 2-3 days, move on to Step 3.



Self-Observation Activity #3: Preparation

Step 3: How does your stress affect others?

After Steps 1 and 2, you should understand what makes you stressed and how you communicate when you are stressed.

Now try to look at the ***effect of your stress on the reaction of the other person***. Each time you react to stress, take a minute to look at yourself and see if the other person:

- Gets defensive
- Starts arguing, or 'attacks' you
- Goes quiet and pulls away
- Tries to convince you not to be stressed
- Sees that you are stressed, listens to you, and offers to help
- What else does the other person do?

The reaction may be different, depending on whether it is a patient or a colleague who reacts to you. Try to observe both situations.

Make notes in your notebook about how stress affects how others react to you.

After 1-2 days, move on to Step 4.

Step 4: Your stress-reaction pattern

After looking at yourself and how you react to stress, you may start to see your ***'stress-reaction' pattern***.

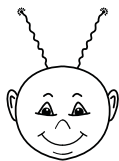
Try to find your stress-reaction pattern by looking at your notes and reflecting on the different situations to find out:

- What have you done in each stress situation to reduce the stress or to solve the problem?
- Which strategies do you have that reduce your stress and the stress of patients and colleagues?
- Which reactions from others help you see and reduce your stress?

Discuss with colleagues, with the intention to understand each others' stress factors and experiences. Share good methods to deal with stress on the personal level, and in the group. Agree on what to look out for, to help each other deal better with stress.

Make notes in your notebook to share with your colleagues at the next PCS training module.





Self-Observation Activity #3: Preparation



You could also include this:

TIP: Try something new to reduce stress!

For example – if you communicate with your ‘difficult colleague’ in a different way than before when she is stressed (e.g. by a friendly greeting, or by a compliment, or by offering her a cup of tea when you see she is tired, or...), you may experience that you have ‘broken the cycle’ of non-constructive communication, and she will react in a friendly way.

It only takes one person to break it. **You?**

Notes for further reflection on changing behaviour

The question is – why do we get stressed? And what can we do about it?

There are some common reactions to stress:

- ‘She stresses me, she always does X when I come in’
- ‘Those patients always stress me, I think they do Y just to annoy me’
- ‘If only Person Z would stop reacting like that, I would not get stressed’

Reflect on: What is common in these examples? Where do we place the responsibility for the stress? What does this attitude do, to our ability to reduce the stress?

Many people think they can change others, and spend a lot of time trying to convince others to do things in the way THEY think is right. If the others do, you don’t have to change yourself, and – that is easier. Change is difficult.

The bad news is – you are the only one who can take action to change your behaviour and reduce your stress. You can’t change others.

The good news is – if you change your behaviour, the other person will change, too.

Self-Observation Activity #3: Preparation

CONCLUSION

Purpose: To close the PCS 02 training and receive any questions or address any questions in the parking lot.



Any comments or questions you may have about what was covered today?

Your Notes

Answers to parking lot questions

Thank you for participating today!

Sharing your experience and insight has been very helpful and informative.

Please use the Learner's Manual regularly to review what you have learned.

Discuss any challenges with your colleagues; they will be most helpful for finding solutions to problems and challenges at your health centre.

Goodbye.



The ACT PRIME Study

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