

Courageous Conversations: Conflict and Communication

Kay Ham, MHR
Adjunct Faculty
University of Oklahoma

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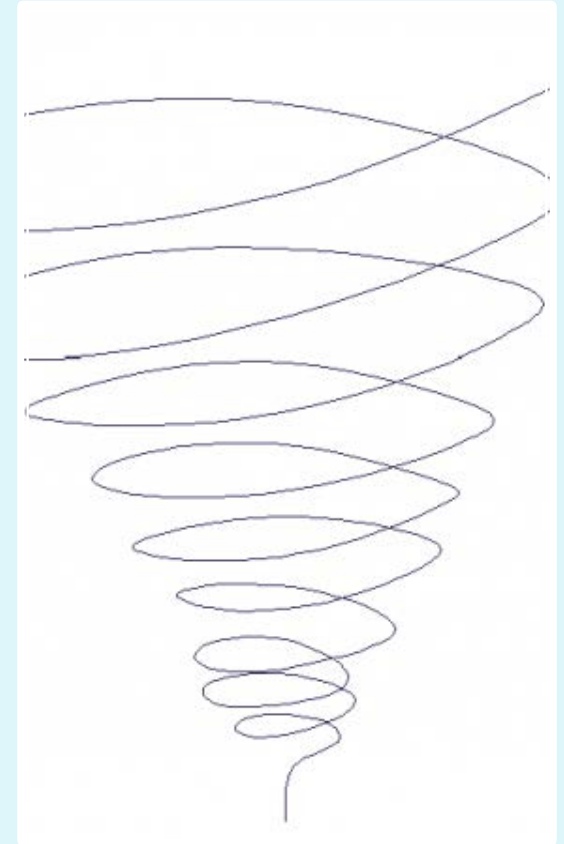


How do you feel about conflict?



The Nature of Conflict

- Perception
- Feeling
- Action
- Escalation Non-linear
- There's no “one best way”
- It's normal
- Learning



Barriers and Pitfalls to Effective Conflict Communication

Structural Barriers

- Time
- Resources
- Location
- Policies and Regulations

Barriers and Pitfalls to Effective Conflict Communication

Human Barriers

- Fear of speaking up
- Fear of the unknown
- Feeling psychologically unsafe
- Lack of trust
- Lack of empathy, understanding
- Need to be right (to win)
- Assumptions about the other
- Lack of caring/lack of respect for other

“There is no compromise without trust and respect, and being heard, acknowledged and honored are critical to building trust and respect.”

Marc Gopin, Institute for Conflict Analysis and Resolution, George Mason University

Common Causes and Underlying Factors

- Human Needs...at the core of all conflicts
- Identity Needs (community, autonomy, intimacy, meaning)
- Values
- Emotions
- Biases, prejudice (prejudice scale handout)

The Significance of Autonomy

Autonomy is:

- Freedom
- Independence
- Thinking for ourselves
- Making our own decisions
- Self-determination
- Agency

Conflict as Opportunity when Patient & Provider Goals Collide

- Think of conflict as a problem to be solved together.
- Is there a way that we can create a mutually acceptable resolution together? (Win-Win solution)
- Invite patients to air their concerns genuinely, without interrupting.
- Listen actively and non-judgmentally.

Conflict as Opportunity when Patient & Provider Goals Collide

- Show that you care, you understand, and respect their point of view. Remember how important autonomy is.
- Explain your concerns respectfully and honestly.
- Offer potential options for adjustments if possible.
- Ask for their thoughts and ideas
 - Thoughtfully consider their comments.
- Keep talking and listening as long as it is productive.
 - Ask open-ended questions
 - Check for understanding
 - Don't Patronize

See Conflict as an *Opportunity* when Patient & Provider Goals Collide

- A third party can be helpful...a nurse-navigator, ombudsperson, other impartial person who can help both professionals and patients understand
- Procedural justice – fair process – most of us can be ok with outcome when we believe we've been treated fairly/listened to, and taken seriously

Ask: What can we learn from this conflict?

- Consider, how can this opportunity strengthen our relationship between the patient and provide?

Show that you

Care

Empathize

Are attuned

Are thoughtful

Are responsive

Honor their
self-
determination

Understand
and respect
them

Listened to
what they say

Understand
their concerns

Eye Contact

Be aware of your Nonverbal
Communication

Be aware of your verbal
Communication

Trust and Be Trustworthy



“Finally, building trust is dependent on people persistently being trustworthy.”

Everett Worthington, Virginia
Commonwealth University

**From
Avoidance
and Barriers**

to

**Engagement &
Effective
Communication**

“Communication is not a choice. Everything you do in a situation communicates something and is, therefore, an intervention of some sort.”

Edgar Schein

Communication is more than technique

- Listening with care
 - Active listening
- Speaking up
- How we engage in conflict is situational (Thomas & Kilmann)
- Styles: avoidant; confrontational, accommodating; compromising; collaborating

Are You Listening?



It's not about the nail.

“All the good techniques in the world will not make up for a lack of genuine interest in what someone else has to say or the absence of a sincere desire to communicate effectively.”

Bernard Mayer

Attitudes and Mindsets

by Bernard Mayer

- **Caring: essential to good communication**
- **Learning: open your mind to the other's perspective**
- **Focus: active listening – stop thinking about your response**
- **Joint effort: communication isn't a one-way street**
- **Help me help you: the “feedback loop”**
- **Tolerance: None of us is a perfect communicator**
- **Genuine and natural**

*“Could a greater miracle take
place than for us to look
through each others’ eyes for
an instant?”*

Henry David Thoreau

For More Information: Resources

- Conflict Consortium, University of Colorado
www.colorado.edu/conflict
- Association for Conflict Resolution www.acr.com
- www.mediate.com
- ESRD NCC Decreasing Dialysis Patient–Provider Conflict Manual (<http://esrdncc.org/professionals/decreasing-dialysis-patient-provider-conflict>)
- Goldstien,R., Manwaring,J., Marks,M., & Zweibel,E. "What Sticks: How Medical Residents and Academic Health Care Faculty Transfer Conflict Resolution Training from the Workshop to the Workplace." *Conflict Resolution Quarterly*, 2008, 25 (3), 321–347.
- Institute for Conflict Analysis and Resolution, George Mason University

For More Information: Books

- Fisher, R., Ury, W., & Patton, B. (2011.) *Getting to Yes: Negotiating Agreement Without Giving In*. New York: Penguin Books
- Krauss, R., and Morsella, E. “Communication and Conflict” in *The Handbook of Conflict Resolution* (2006.) (2nd ed.), Deutsch, Coleman, and Marcus, eds. San Francisco: Jossey-Bass
- Mayer, B. (2012). *The Dynamics of Conflict: A Guide to Engagement and Intervention*. (2nd ed.) San Francisco: Jossey-Bass
- Schein, E. (2011). *Helping: How to Offer, Give, and Receive Help*. San Francisco: Berrett-Koehler
- Stone, D., Patton, B., & Heen, S. (2010). *Difficult Conversations: How to Address What Matters Most*. New York: Penguin Group