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2016

Therapeutic Communication: Ensuring its Effectiveness with Patients Affected by Mental Health Disorders

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Therapeutic Communication

Ensuring its effectiveness with patients affected by mental health disorders.

By Dawn Garrett, PhD, PMHNP, CNE, Lorraine Bormann, PhD, RN, MHA, CPHQ, FACHE, and Kim Link, MSN, PMHNP

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Learning Objectives

The goal of this article is to educate nurses about therapeutic communication with patients affected by mental health disorders. After reading this article, the nurse will be able to:

1. Discuss factors that impact therapeutic communication in the mental health setting.
2. Differentiate between therapeutic and nontherapeutic techniques for interviewing, assessment and communication with patients.
3. Describe patient safety issues related to communicating with patients with a mental health disorder.

Communication is central to the relationship between the health professional and the patient.¹ Effective communication can have positive effects on both the satisfaction of patients and their health outcomes.¹ Kleier² notes that positive communication between patients and providers can lead to increased adherence to treatment plans for patients and lower malpractice risks for providers. Therapeutic communication is also a key component of patient-centered care, which is one of the six competencies of the Quality and Safety Education for Nurses initiative.^{3,4} Nurses learn the basics of therapeutic communication techniques during their undergraduate education and continue to refine these important skills throughout their careers.² The goal of therapeutic communication is to facilitate the development of nurse-patient relationships that are grounded in mutual respect and trust.² Jarvis⁵ noted that successful communication assists patients in sharing important health information with the provider, creates opportunities to discuss health promotion/disease prevention, provides opportunities to educate the patient on

current health conditions, and facilitates treatment planning and goal setting.

There is no doubt that therapeutic communication is a skill that must be learned and cultivated, regardless of a nurse's practice setting. The purpose of this continuing education article is to assist nurses in understanding the following: factors that impact communication; the difference between therapeutic and nontherapeutic techniques; and specific techniques that will aid in communicating with patients affected by mental illness.

Factors Impacting Therapeutic Communication

Numerous internal and external factors can influence how a nurse communicates with a patient. An awareness of these factors, as well as the ability to adapt to a difficult situation, can determine whether or not the nurse-patient interaction is therapeutic. Influences that impact effective communication include personal, environmental and relationship factors.⁶

Various personal reasons can affect how a nurse communicates with his or her patients. These include emotional, social and cognitive factors.⁶ Nurses experience the same emotional responses as all other humans, including stress, anxiety and having personal biases/prejudices.^{5,6} Learning to understand and control one's emotions is an important aspect of communicating effectively in healthcare. It is common practice that nurses bring their previous life and work experiences, as well as cultural and lifestyle preferences, into clinical practice. These contribute to their interactions with patients and other providers.⁶ Finally, the nurse's knowledge, verbal ability and problem-solving skills are factors that affect how he or she communicates with others within the healthcare setting.⁶

Environmental factors within the healthcare setting can also impact the communication process. Varcolis⁶ divides these environmental factors into two major categories: physical factors and social determinants. An uncomfortable environment can hinder communication between a nurse and patient. When the nurse is preparing for the patient interview, he or she should consider the physical environment, including temperature, lighting, noise level and the privacy of the setting.⁵ Social determinants that may impact communication in healthcare include factors such as the presence of family and/or friends in the room, historical events and the patient's economic concerns.⁶

Nurses must be aware of the effect of relationship status on their communication with patients. Relationships between nurses and patients can be called complementary.⁶ This means that one party in the relationship is seen as having more power or status.⁶ Nurses should be aware of the power that comes with being a member of the healthcare team, and how that power may influence a patient's comfort in communicating with nurses about personal issues.⁶

Several qualities can assist nurses with improving and increasing their use of therapeutic communication skills.⁵ These qualities include liking others, showing empathy, using good listening skills, and being genuine and self-aware.⁵ Liking others entails showing optimism and respect for others in all situations.⁵ This can also be defined as having positive regard for the patient, in which the nurse sees the strengths of the patient and believes that the patient has the potential to achieve his or her goals.⁶

Effective communication requires the use of empathy, not sympathy. With empathetic communication, the nurse attempts to understand the patient's point of view, rather than trying to feel the emotions of the patient.⁶ Empathetic communication implies an understanding of the patient's perception.^{5,6} Therapeutic communication requires active listening.^{5,6} This type of listening requires the nurse to put aside preoccupations and interruptions, and to truly focus on the message the patient is trying to convey. This includes interpreting messages and using

clarification to make sure the nurse understands the patient during the interview and care process.^{5,6} Being genuine and knowing personal thoughts and feelings can make the communication process more effective. The nurse must first acknowledge and be aware of his or her own biases and prejudices prior to the initial conversation with the patient.^{5,6} Self-awareness requires the nurse to clarify his or her own values, and to have the ability to work with patients whose values may differ from their own.

Therapeutic and Nontherapeutic Communication

When interacting with patients, nurses often fall into the trap of using what are known as nontherapeutic communication techniques. Nontherapeutic communication techniques block open communication and prevent the development of the trust required to form a successful nurse-patient relationship. Some common nontherapeutic techniques include giving false reassurance, giving advice, using professional jargon to distance one's self from the patient, and asking "why" questions.^{5,6} **Table 1** provides examples of nontherapeutic communication with patients.

Table 1: Nontherapeutic Communication Techniques

TECHNIQUE	EXAMPLES	RATIONALE FOR NOT USING THIS TECHNIQUE
FALSE REASSURANCE	"It will be okay." "Don't worry; everything will work out for the best."	Comments such as this can belittle patients and prevent them from fully sharing feelings and concerns. ⁵ These types of comments are also inappropriate because you cannot guarantee the outcome of situations. ⁵
GIVING ADVICE	"If I were you, I would ..." "You should leave your husband."	These responses suggest the nurse knows more about the situation than the patient. This can create a sense of dependency and prevent problem solving on the part of the patient. ^{5,7}
USING EXCESSIVE MEDICAL JARGON	"Your father had a myocardial infarction." "You have a stage 4 basal cell carcinoma on the helix of your ear."	The use of excessive medical jargon can lead to misunderstandings and confuse the patient and family. ⁵
ASKING "WHY" QUESTIONS	"Why are you still drinking?" "Why didn't you follow the instructions for your medication?"	"Why" questions have negative connotations such as blame, criticism, and condemnation. ^{5,8}

Hildegard Peplau noted that communication was key to improving the care that nurses provide to patients.⁶ Therapeutic communication techniques encourage patients to discuss their feelings openly with the nurse.⁷ Some important therapeutic techniques that nurses can use in any practice setting include offering their time and attention, facilitating broad openings and silence, giving information, and employing various clarification techniques.⁵⁻⁷ **Table 2** provides examples of these techniques.

Techniques for Specific Mental Health Disorders

The use of therapeutic communication is necessary for developing an effective nurse-patient relationship that focuses on the needs of the patient.⁵⁻⁷ The nurse has several important goals in communicating with the patient who has a mental health disorder. These goals include helping the patient feel valued and understood, exploring the patient's emotional needs, identifying any problems with the patient's cognitive function, and working with the patient on interpersonal and relationship issues.⁶

In addition to the general therapeutic communication techniques that can be used in all practice settings, nurses must also be aware of communication techniques that will assist in managing care for patients with specific mental health diagnoses. Nurses should be aware of communication techniques that are appropriate for use with patients with depression, anxiety or psychosis, and patients who may be under the influence of drugs or alcohol.

Communicating with Depressed Patients

Therapeutic communication can be one of the most important interventions for a patient who is experiencing severe depression. Clinically depressed patients may be experiencing psychomotor retardation/agitation and can withdraw from social contact due to the feeling of helplessness, hopelessness and worthlessness.^{6,7}

Table 2: Therapeutic Communication Techniques

TECHNIQUE	EXAMPLES	RATIONALE FOR USING THIS TECHNIQUE
OFFERING SELF	"I'll stay with you for a while." "I'm interested in spending time with you."	These types of responses show interest in the patient, but don't require the patient to respond. This technique is effective with patients who are debilitated with severe depression or other major illnesses. ^{6,7}
BROAD OPENINGS	"What would you like to talk about today?" "Tell me more about what happened to bring you here."	This technique asks the patient to provide narrative information and gives the patient the opportunity to provide direction for the interaction with the nurse. ^{6,7}
SILENCE	The nurse does not speak but maintains eye contact and, in some cases, may use touch with the patient.	Silent periods offer both the nurse and patient time to reflect on the interaction and can provide time for the patient to organize his or her thoughts. ^{6,7}
GIVING INFORMATION	"The AA meeting will be held at 9 a.m. today in the recreation room." "Dr. Smith's office is on the third floor of the medical complex."	Providing information assists the patient in participating in care, allows the nurse to be seen as a resource, and assists in building the therapeutic relationship. ⁷
CLARIFICATION	Reflecting: Patient: "What should I do about losing my job?" Nurse: "What do you feel you should do about losing your job?" Exploring: "Tell me more about what was happening in your life when you first started drinking."	Clarification includes using paraphrasing, exploring, reflecting, and restating techniques to ensure the correct message has been received. These techniques help gather feedback on interpretations of what the patient has told the nurse and clear up any ambiguous messages. ⁶

In these cases, it is necessary for the nurse to offer independent attentive conversations and be willing to adapt to the patient's current demeanor. The depressed patient may not want to openly vocalize his or her feelings, and understanding this, the nurse may just sit with the patient in silence and provide support by their presence.^{6,7}

Nurses working with depressed patients should use simple, concrete statements and make basic observations to initiate conversation. These strategies show interest in communicating with the patient but do not add stress to the patient who may be experiencing cognitive slowing due to his or her depression.⁶

Nurses should also use therapeutic communication as a mechanism to help depressed patients recognize cognitive distortions. Severely depressed patients display distorted thought processes, such as self-blaming and making overgeneralizations.⁶ Nurses can also encourage patients to communicate with others through individual and group therapy sessions.⁶

Communicating with Anxious Patients

Patients can experience various levels of anxiety. The patient's level of anxiety will determine which communication strategies the nurse should utilize.⁷ Patients experiencing mild to moderate levels of anxiety are mostly able to process information and problem-solve.⁶ Because these skills are intact, the nurse may use more open-ended questions and broad openings with

the patient during the assessment and interview process.

Patients experiencing severe to panic levels of anxiety have limited perceptual ability and may misinterpret stimuli.⁶ Therefore, patients with a severe to panic level of anxiety need more simple and direct communication from the nurse.⁶ The nurse will need to focus on reinforcing reality and listening for themes that may emerge from the patient's communication.⁶ The nurse should use a low-pitched speaking voice to convey a sense of calm for the patient.⁶ Most importantly, the nurse should stay with a patient who is experiencing severe to panic level anxiety to help the patient feel safe and in control of the situation.^{6,7}

Communicating with Psychotic Patients

Patients with a variety of mental health disorders may display psychotic symptoms related to schizophrenia, dementia, substance intoxication/withdrawal and severe depression.^{6,7} Common psychotic symptoms that may be displayed include hallucinations, delusions and paranoia.^{6,7} Nurses must understand that psychotic symptoms are real for the patient experiencing them, even though they are not an accurate representation of reality. Patients who experience these symptoms need to be approached in a caring, empathetic, and nonjudgmental way. The nurse should focus on understanding the patient's feelings behind the symptoms.⁶

For patients with hallucinations, it is crucial to assess the type of hallucinations that are being experienced. Auditory hallucinations are the most common form, and nurses must assess for command auditory hallucinations.⁶ Patients experiencing command auditory hallucinations can be a danger to self or others, because the voices they hear often encourage them to hurt themselves and/or others.^{6,7}

Conversations should focus on reality-based topics, and communication should be simple and concrete.⁶ Paranoid patients will often misinterpret communication. Consistency and honesty are vital when working with paranoid patients. Nurses must also be careful of the way they communicate with other staff and patients when a paranoid patient is on the unit or in the clinic. Patients with paranoia often misinterpret others' laughing or whispering as being directed toward them.^{6,7}

Communicating in the Presence of Substance Use

Therapeutic communication is important for patients with substance use issues. Nurses can use open and accepting communication to assist patients with addressing issues related to their substance abuse.⁶

If the nurse is working with a patient who is intoxicated or withdrawing from substances, it is important to keep communication simple and to ask specific questions.⁵ Confrontation should be avoided at all times to ensure the safety of both the nurse and the patient.

Nurses can expect that patients in recovery from substance use issues will use a variety of defense mechanisms and manipulation techniques when communicating with others. It is important that the nurse clarify his or her own values related to substance use, prior to working with patients with substance use disorders.⁶

Safety Issues

Nurses may encounter a variety of safety issues when communicating with patients who have mental health disorders. Basic safety concerns include keeping patients and staff safe when a

patient is experiencing altered thought processes and suicidal ideations. The list below includes essential actions to keep the nurse, patient and other people in the immediate environment safe.

- The nurse should have a way to get out of the room if he or she feels unsafe. This requires positioning one's self between the patient and the door, if possible.⁵⁻⁷
- The nurse should let other staff know when they are going to be in a room communicating with a patient for an extended period of time, and should have the ability to call extra staff for support if a patient's behavior escalates unexpectedly.⁶
- Nurses should always assess for hallucinations and delusions to have a better understanding of the patient's reality and to look for underlying feelings, such as fear or anger.^{6,7} The content of command hallucinations must be discussed and documented.
- All patients must be assessed for suicidal and homicidal ideations. Nurses should understand that discussing these sensitive subjects will not cause patients to develop thoughts of wanting to hurt themselves or others. The nurse should communicate that the situation being experienced by the patient is temporary, and that help is available for patients who are suicidal.⁶

A Powerful Tool

Therapeutic communication is a powerful tool nurses can use to improve their relationships with patients and to positively impact the care that they are providing. The type of communication used by the nurse can make the difference between an encounter that is effective and therapeutic, versus an encounter that is ineffective and unsatisfying for both the nurse and patient. Nurses must utilize the basic therapeutic communication skills they were taught in nursing school throughout their career and in all clinical settings. These skills are of special importance when working with patients affected by mental illness.

The nurse must strive to use clear, direct and nonjudgmental communication with all patients. Nurses working with patients who have a mental illness also require an understanding of how communication can affect the symptom profile of certain illnesses. Nurses must always be cognizant of safety issues that may develop when working with patients who are experiencing altered thought processes. By using therapeutic communication techniques, nurses can increase patient satisfaction, improve healthcare outcomes, and provide care in a safe environment.

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