

# **Communication Skills for Building Rapport During Contact Investigation Interviewing**

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# Learning Objectives

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**After this session, participants will be able to:**

- 1. Describe how to build rapport**
- 2. List at least six effective communication skills**
- 3. Describe assertive, passive, and aggressive behavior**

# Building Rapport

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**Building rapport is the key to a successful case/health care worker relationship**

**What is Rapport?**

***Definition:***

***1: relation of trust between people***

***2: a feeling of sympathetic understanding***

***3: in accord, harmony***

***4: having a mutual understanding***

# How Do You Build Rapport?

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## Methods to build rapport

- **Use effective communication skills**
- **Find common ground**
- **Display respect and empathy**



# Effective Communication Skills

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# Effective Communication Skills

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- A. Active listening**
- B. Using appropriate nonverbal communication**
- C. Using appropriate voice and tone**
- D. Communicating at the case's level of understanding**
- E. Giving factual information**
- F. Using reinforcement**
- G. Summarizing important points from the conversation**

# A. What is Active Listening?

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- **Hearing what is said and paying attention to how it is said so the conversation can be adjusted to elicit the needed response**
- **Utilizing various verbal and nonverbal techniques**



# What are Some Active Listening Techniques?

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- **Paraphrasing and summarizing**
- **Reflecting**
- **Being silent**

# Active Listening

## Paraphrasing and Summarizing (1)

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**What is paraphrasing and summarizing?**

- **Rewording or rephrasing a statement to**
  - **Verify information**
  - **Demonstrate engagement in the conversation**

# Active Listening

## Paraphrasing and Summarizing (2)

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**How do you do it?**

- **Use phrases such as “What I’m hearing is...” or “It sounds like you are saying...”**
- **Do not repeat the person’s exact words**
- **Avoid phrases like “I know what you mean.”**

# Active Listening

## Paraphrasing and Summarizing Example (1)

### Example 1:

***Case: “I am feeling very tired these days and the meds mess up my drug use. I don’t know if it’s all worth it.”***

**How would you paraphrase this statement?**

# Active Listening

## Paraphrasing and Summarizing Example (2)

### Example 2:

***Case: “I can’t tell you the names of all my contacts. I just hang out at the pool hall; there is a guy we call Slim, another one named JD. ”***

**How would you paraphrase this statement?**

# Active Listening Reflection (1)

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## What is reflection?

- **Putting words to a case or contact's emotional reactions**
  - **Acknowledging a case or contact's feelings shows empathy and helps build rapport**
  - **Helps to check rather than to assume you know what is meant**

# Active Listening Reflection (2)

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**How do you do it?**

- **Reflect back to the case or contact what you think they have said**
- **Examples...**
  - **It sounds like you are feeling worried...**
  - **I understand you are having trouble with...**

# Active Listening Reflection Example (1)

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## Example 1:

***Case: “I’m feeling tired and this whole interview is making me nervous. YOU are asking me too many questions.”***

**How would you reflect this statement?**



# Active Listening Reflection Example (2)

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## Example 2:

***Case: “I don’t want an HIV test. I don’t want to know if I have AIDS. If there is nothing I can do about it, what’s the point in knowing?”***

**How would you reflect this statement?**

# Active Listening Using Silence

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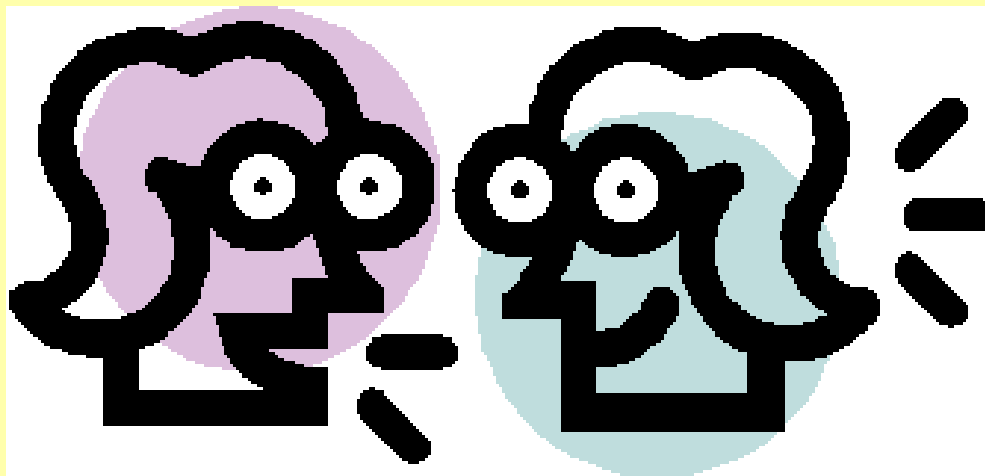
**How can silence indicate you are actively listening?**

- **It allows the case an opportunity to answer questions**

# Active Listening Exercise

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Refer to Appendix I



# **B. Using Appropriate Nonverbal Communication**

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## **Nonverbal communication**

- Is an important aspect of building rapport**
- Can be both what the interviewer or case conveys with his/her body language**
- Interviewer should**
  - Display appropriate body language**
  - Be observant of the case's body language**

# Appropriate Nonverbal Communication for Interviewer

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- **Eye contact**
- **Facial expressions**
  - Looking attentive
- **Posture**
  - Leaning forward
- **Gestures**
  - Nodding head
- **Movement and mirroring**



*Refer to Appendix J*

# Interpreting Body Language

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<b>Nonverbal Cues</b>	<b>Possible Meaning</b>
<b>Faltering eye contact</b>	Boredom or fatigue
<b>Intense eye contact</b>	Fear, confrontation, or anger
<b>Rocking</b>	Fear or nervousness
<b>Stiff posture</b>	Discomfort or nervousness
<b>Elevated voice</b>	Confrontation or anger
<b>Prolonged <i>and</i> frequent periods of silence</b>	Disinterest, loss of train of thought, or fatigue
<b>Fidgeting</b>	Discomfort, disinterest, nervousness, possible drug use

# C. Using Appropriate Voice and Tone

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## Voice and tone

- Use natural volume and tone
  - If voice is too loud, the case may be intimidated
  - If too soft, the message may be inaudible or sound hesitant

## Pace

- Use regular pace
  - If too fast, it can indicate a feeling of being rushed
  - If too slow, it can sound tentative

## **D. Communicate at Case or Contact's Level**

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- **Avoid technical terms and jargon**
- **Limit the amount of information shared**
  - **“Need to Know” vs. “Nice to Know”**
- **Clearly explain necessary medical and technical terms and concepts**
- **Repeat important information**



# E. Give Factual Information

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- **Correct misconceptions**
- **Provide comprehensive TB information**
- **Avoid irrelevant information**



## F. Use Reinforcement

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- **Sincerely compliment or acknowledge the case after hearing intentions to use, or descriptions of, healthy behaviors**
- **Use smiles and affirmative nods and words**

# G. Summarize Conversation (1)

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- **Throughout the conversation, periodically summarize what has been said**
- **Summarizing gives the case an opportunity to correct information that you may have misunderstood**

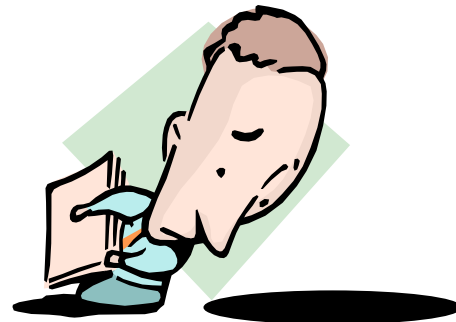
# G. Summarize Conversation (2)

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- **Give the case an opportunity to summarize the conversation, for example:**
  - **“We have covered a lot today. In your own words, review for me what we have discussed.”**
  - **“Please tell me what you heard me say. This will help me provide you with any additional information you need.”**
- **Avoid phrases such as:**
  - **“Do you have any questions?”**
  - **“Do you understand?”**

# Communication Pitfalls

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# **Communication Pitfalls to Avoid (1)**

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- **Being defensive or distant**
- **Interrupting, not allowing patient to finish speaking**
- **Giving false assurances**
- **Providing personal opinion and advice**

# Communication Pitfalls to Avoid (2)

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- **Overpowering the case**
  - **Speaking loudly**
  - **Standing over the case**
  - **Making condescending statements**
- **Asking several questions at once**
- **Being aggressive**

# **Group Discussion**

## **Barriers to Communicating**

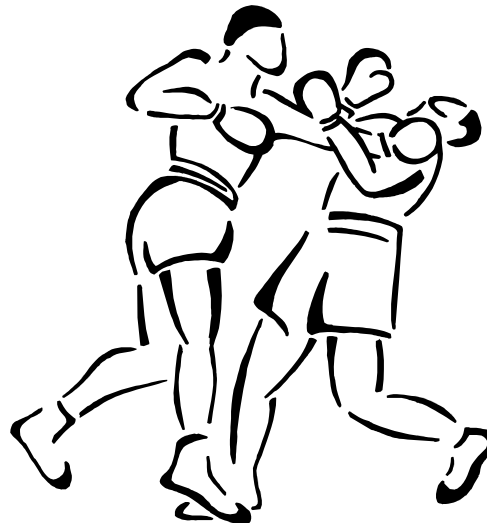
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- **What are some barriers to communicating with cases?**
- **What impact could they have on the interview?**
- **How can these be prevented or overcome?**



# Assertive, Passive, and Aggressive Behavior

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# Assertive, Passive, or Aggressive Definitions

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- **Assertive**: to maintain one's rights without compromising the rights of others
- **Passive**: to relinquish one's rights in deference of others
- **Aggressive**: to demand one's rights at the expense of others

# Assertive, Passive, or Aggressive Examples (1)

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- **Passive**: “When you have an opportunity, it would be helpful to get the names of people you spent time with.”
- **Assertive**: “It’s important to identify your contacts. Let’s start making a list of the people you spend the most time with.”
- **Aggressive**: “You must give me all the names of your contacts. NOW!”

# Assertive, Passive, or Aggressive Examples (2)

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- **Passive**: “That smoke really bothers me. I’ll go outside while you smoke in here.”
- **Assertive**: “Although you may smoke outside in the courtyard, smoking is not permitted in the building because it is a health risk to others.”
- **Aggressive**: “How can you be so disgusting and insensitive smoking in here. Get out of here!”

# Being Assertive

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- **By being assertive with cases and others we are not only asserting our rights but also the rights of those not present – the contacts who may have been exposed to TB**
- **To be effective in this role, a belief in what you are doing is required**
- **Remember: You have the responsibility and obligation to elicit information that will reduce TB in your community**

# Assertive, Passive, or Aggressive Exercise

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**Refer to Appendix K**



# Review

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- 1. What are some ways to build rapport with a case?**
- 2. What are six effective communication skills?**
- 3. What is the difference between assertive, passive, and aggressive behavior?**