

## Effective Communication Strategies

Effective communication forms the foundation of healthy relationships, as we all seek to be heard, understood, and valued. When supporting a loved one experiencing psychosis, our best efforts at supportive, empathic, and effective communication can be thrown off course.

**In the words of Psychosis REACH Family Ambassador, Denise Winter:**

*How do we cope and feel joy in our lives when our loved ones are struggling? How do we prevent ourselves from dissolving into the abyss of a loved one's struggle? How do we find peace when we fear something terrible has happened to our loved one? How do we engage in healthy coping strategies when we feel sick with anxiety? How do we react when our loved one accuses us of harming them or they share that they want to go off all of their medications? These are just a sampling of the ongoing questions that we face.*

To address common challenges around effective communication, we've compiled a list of strategies and short phrases to improve communication during challenging interactions. It is important to remember that there is no script or set of magic phrases that will shift the psychosis. That said, when these strategies are used consistently, they can work to create more peaceful and effective dialogues. These strategies were co-developed with Psychosis REACH Family Ambassadors, **Amy Toole, Denise Winter, Susan Adams, and Alessandra Corazza.**

### General Communication Strategies

- When tensions are high, say as little as possible.
- Label the emotion you are feeling in your private thoughts. Studies show that the simple act of labeling an emotion can reduce its intensity. It can sound like this, *"Right now I am feeling scared. I trust that I am strong enough to ride this fear wave."*

- The calmer you feel, the more effective you can be. Take a beat to slow your breath before responding. This also models an effective practice for your loved one.
- Speak slowly to allow time for processing.
- Maintain a calm tone of voice. Your goal is to bring your loved one's energy down to match yours rather than have your energy ramping up to match theirs.
- Give them time to respond. Count to 10 in your head after making a statement or asking a question.
- Refer to your loved one by a name that is familiar to them.
- Use simple words and short sentences. Well-intentioned caregivers have a tendency to over explain. Instead of being a waterfall, be a well. If they have additional questions, they can ask.
- If you are unsure what your loved one is saying, ask for clarification.
- Always start by looking for common ground.
- Compliment your loved one for any positive actions they have taken.
- Replace the word "but" with "and" whenever possible.
- Always look for opportunities to validate and normalize (for example, using the phrase, *"That makes a lot of sense."* or *"I'd feel upset too."*)

### **Knowing When to End the Interaction**

Everyone has the right to end interactions when they see fit and to abide by their personal boundaries. This will look different for each person. When you notice any of the following, use a short phrase to tactfully end the interaction.

- Arguing
- Personal attacks
- Power Plays
- Moralizing
- Diagnosing
- Stigmatizing
- Colluding

- Confronting (i.e., *“That’s delusional.”*)
- Threats

Select one phrase to end the interaction and be a broken record. For instance, *“It is clear we both care a lot about this. Let’s put it on the shelf for now.”* or *“I’m not able to answer that.”*

### **Active Listening Skills**

Active listening requires that you listen attentively to your loved one, understand what they're saying, and then respond and reflect on what is being said. These could include restating or paraphrasing what you heard your loved one say or reflecting back the emotion you heard. Other important active listening skills include:

- Minimal encouragements
- Rephrasing and paraphrasing
- Emotion labeling
- Mirroring
- Open-ended questions
- Waiting for a response (10-second rule)

### **Ask Open-Ended, Curious, Non-Judgmental Questions**

These questions are the bedrock of the “I” skills. They require that you replace assumptions with open-ended, curious, non-judgmental questions, like:

- *When you say \_\_\_\_, what do you mean?*
- *What do you make of that?*
- *When did the concern first come up?*
- *What was going on in your life at that time?*
- *When did this happen?*
- *Who else was there?*
- *What led you to think that was the case?*
- *How could someone else tell this was happening?*
- *What other explanations could there be?*
- *How can you test out some alternatives?*

- *Where/how could we find out more about this?*
- *Tell me more.*
- *Help me understand.*
- *How does stopping the medication help you achieve your desired outcome?*

### **How to Support, Empathize, and Validate the Emotion(s)**

Remember that validating emotions is not the same as colluding or agreeing. Emotions are not right, wrong, good, or bad. They just ARE! You can always validate emotions. Use statements like this to help express validation, empathy, and support:

- *I understand. That makes sense. I hear what you are saying.*
- *I am here whenever you need me. You are not alone in this.*
- *How can I support you right now?*
- *You are important to me.*
- *Please don't feel guilty for receiving support during this difficult period.*
- *We are in this together.*
- *That sounds difficult. How are you coping?*
- *Why don't you tell me how you are feeling?*
- *Thank you for telling me.*
- *You are worthy and deserving.*

### **Strategies for Showing Remorse**

Apologizing effectively is not a skill that most of us are taught, yet it is one of the most critical skills for maintaining healthy relationships. The following phrases can help communicate an earnest desire to reset after a relationship rupture:

- *I see this has upset you, and I am sorry I have hurt you. Can you help me understand your perspective better?*
- *I am sorry that I am contributing to your frustration.*
- *I would like to understand better the ways in which I am controlling you.*
- *I am sorry I got it wrong. What are you feeling?*
- *I apologize for speaking to you that way. It wasn't right.*

- *I am doing the best I can, and I'm committed to doing better.*
- *That didn't come out the way I intended. Allow me to try that again.*

### **Strategies to Tactfully Disagree**

As above, learning how to tactfully disagree is both an untaught skill and one that is critical to maintaining healthy relationships. Particularly when interacting with loved ones who struggle with strongly held, unshared beliefs, caregivers should take great care in how they disagree with their loved one. In CBT for psychosis, we call the artful balance the therapist takes between colluding with and confronting the strongly held viewpoint “empathic disagreement.” Review the strategies and phrases below about staying in a space of empathic disagreement.

- Start with common ground (*I agree this is an important topic*).
- Summarize what you've learned from them (*After listening, I've learned that this is important to you*).
- Consider a simple mantra.
  - *You've given me a lot to think about.*
  - *We see things differently.*
- If you are at an impasse:
  - *It seems we are stuck. Let's try talking about this again tomorrow.*
  - *I'm noticing that I am too stressed to be effective in this conversation. I am going to take a break to get some fresh air and do some deep breathing.*
  - *I need some time to think through what you've shared with me.*
  - *This seems to be taxing for both of us. Should we take a break?*
  - *I am having a hard time. Let's reconnect tomorrow.*
  - *I need some space to cool down and think about what happened.*

### **Communicating Difficult Feelings**

Talking about feelings is hard! It can be especially difficult for people who were raised in families that did not talk about emotions. When upsetting feelings come up in yourself or your loved one, try these phrases out:

- *I am feeling upset now.*
- *I don't have the energy to talk about this now. Please respect this.*
- *I feel angry but I don't really know what to say [instead of the silent treatment].*
- *I feel hurt by the way I was treated.*
- *I can see that you are angry.*

### **Asking for Permission**

This is a communication strategy that is designed to enhance feelings of collaboration. As caregivers, it is easy to slip into well-intentioned but unsolicited advice-giving. Try these phrases to ensure that your loved one is willing to “go there” with you:

- *Would it be ok for us to review your concerns about the medication?*
- *Do you mind if we spend a few minutes talking about...?*
- *Can I share what I have learned about x?*
- *Can I share my perspective on this?*
- *It sounds like you don't want to take the medication because you are concerned you will have a bad reaction. Do I have that right?*

### **Alternatives to Giving Advice**

These phrases offer alternatives to advice-giving that tap into your loved one's strengths and their rights to agency and self-determination.

- *How does this fit in with your long-term goals?*
- *How does this connect with your values?*
- *What strengths can you tap into to help you through this problem?*
- *There could be another way to look at this. Have you considered...?*
- *What would someone you look up to say about this?*
- *This may seem like a good idea at this moment, but how will you feel in a week? A month? A year?*
- *Making that hard decision myself really forced me to grow.*
- *A lot of people love you. You don't have to get through this alone.*

- *I've seen you get through extremely challenging times in the past. I believe in you.*
- *I want to make sure I am getting this right. Can you help me understand?*
- *What has helped you when you felt like this before?*

### **Affirmation**

Behavioral therapists look for every opportunity to reinforce adaptive, healthy, and effective behaviors. Affirmations can boost mood and support the bond between you and your loved one.

- *I think it's great that you are thinking about doing this now.*
- *You are really getting serious about \_\_\_\_.*
- *It's clear you are really trying to change your situation.*
- *We are better together.*
- *I admire you.*

Next, we will turn to common scenarios generated by our Psychosis REACH Family Ambassadors, along with suggestions for how to navigate these scenarios.

### **Scenario 1: Responding to a loved one who will not let you get a word in.**

- Minimize background distractions.
- Say nothing. Use active listening skills.
- Be patient and make sure your non-verbals indicate that you are listening.
- Use empathic statements.
- Validate emotions.
- *Do you mind if I slip in?*
- *You said \_\_\_\_\_. Can you tell me what you meant by that?*
- *On a scale of 1 - 10, how high is your anxiety right now?*
- *What has been helpful to you in the past?*
- *That's hard stuff that you're dealing with. Can we take a minute to breathe?*



- *Is it ok if I write this down? I want to make sure I'm capturing what you're saying. Please repeat what you just said more slowly.*
- *How can we reduce your stress?*

**Scenario 2: Responding to a loved one who is focused on a delusional or unshared idea.**

- *It's hard for me to fully understand the threat you feel because I can't hear the voices. But I can see the distress that you're experiencing, and I want to help you with that.*
- *When did you first start thinking about this? What was going on at that time?*
- *It's interesting you see it that way. Can I share my perspective?*
- *I hear you saying you [repeat what they have shared]. You have had so much stress lately. What does your doctor say about this?*
- *You have learned so many strategies to keep these thoughts in check! I'm so impressed.*
- *Can you share with me what has been most helpful to get relief from these concerns?*
- *I know you've stated some reasons to believe X, but I wonder what reasons come up for you that cause you to doubt that X is 100% true all of the time?*
- *Thanks for sharing/telling/talking to me about this. I have never heard of this. Can you tell me more about this experience?*
- *When did you first start experiencing this? How does it affect you?*
- *How is it a problem? How did it get there? If that is so, do other people experience it?*
- *What are some other ways to look at this situation?*
- *Does this concern come up more for you when you are feeling anxious/stressed/tired/etc.?*
- *When you feel more relaxed/ less anxious, how much of a concern is this for you?*



- *What else would you want to be doing if you weren't spending as much time on this concern?*

**Scenario 3: Responding to a loved one's delusional thinking that has unfounded accusations.**

- Respond with non-judgmental curiosity.
- *What am I doing today that has you worried?*
- *Thank you for sharing with me that you are thinking about these things. It sounds upsetting. Have you talked to your care team about this yet?*
- *Can you help me understand the experience you had and how you came to believe this?*
- *Do you think I am a different person than I was? What do you think has changed?*
- *Would you like to hear my thoughts on this?*
- *I have a different interpretation of that.*
- *What can I do to help you feel safe?*
- *That hurts me to hear that.*

**Scenario 4: Responding to a loved one's demands for you to do something you are not able to or are not comfortable with.**

- *Help me understand why this is important to you. What values are connected to this request? What goals are connected to this request? What are some other ways to connect to those values and goals?*
- *What else have you tried so far?*
- *How would [insert name] approach this?*
- *I am not able to do that. I would love to find a way to help that we are both comfortable with.*
- *If we continue to talk, we might find a suitable solution—even if it's just temporary.*
- *I can see that we are both struggling with how to resolve this issue.*
- *Here is something we could think about...*

- *I want you to know that I am registering your points. I may not be able to do everything you are asking of me, but I understand why they are important to you.*

**Scenario 5: Responding to a loved one who shares plans you do not agree with.**

- *Amplify your loved one's positive values or traits (for example, "You have always been someone who would look after others." or "Your family has never been in trouble of any kind." or "Christianity (Islam or Buddhism, etc.) is a religion of peace.")*
- *Talk me through your thinking on this.*
- *What are some other options you have considered so far?*
- *What would [insert name] do?*
- *What are the advantages of this approach? What are the drawbacks? What are the drawbacks of a different approach? What are the advantages of a different approach?*
- *What would let you know that this plan was going well? What would let you know that this plan was not going well?*
- *We both care about this. Let's keep discussing it so we can fully understand each other's perspectives.*
- *We both agree on X. That's important.*

**Scenario 6: Responding with boundaries for self-care.**

- *I am sorry nothing I am trying seems to help. I love you. Let me know if you think of anything I can do.*
- *I need to do something else now because I am feeling sad, but I hope I can help some other time.*
- *I need to take a time out. We can talk more later.*
- *I am interested in what you're saying but I need a bathroom break. I'll be back in a few minutes.*
- *Before we start talking, I want to let you know I only have 15 minutes to chat today. What would you like to discuss in that time?*
- *I'm not okay with X. If X happens, I will need to excuse myself.*