

Difficult Conversations

Student Support Forum

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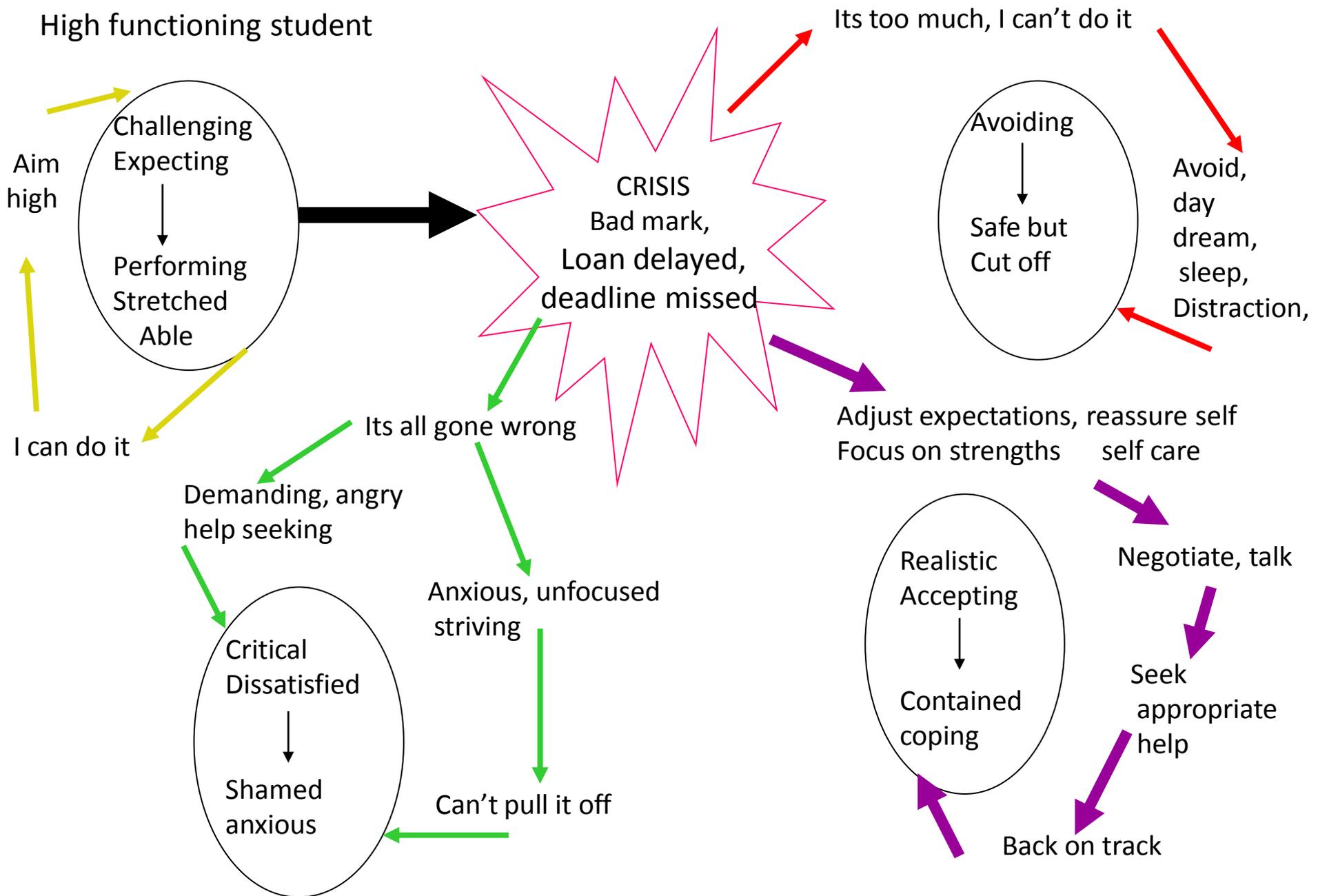
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Patterns of relating and functioning

- We internalise key patterns of relating early in life – Other to self, self to other, self to self (e.g.)
- These templates form basis for our sense of self and patterns of coping
- We all have a repertoire of possible relational positions –flexibly fitting role to context, task or other
- Loss of flexibility or an underlying narrow repertoire can result in problems

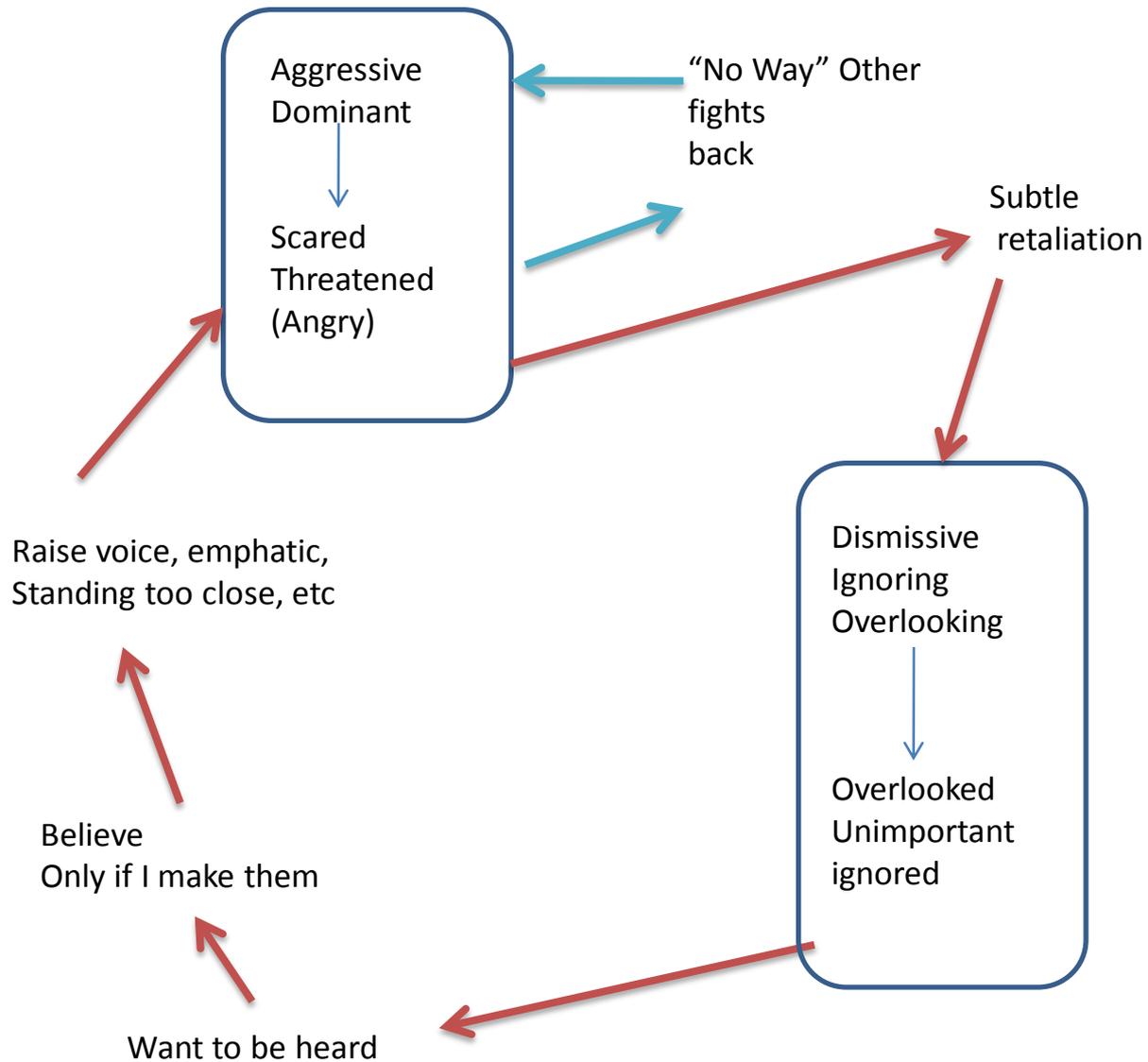
Getting hijacked

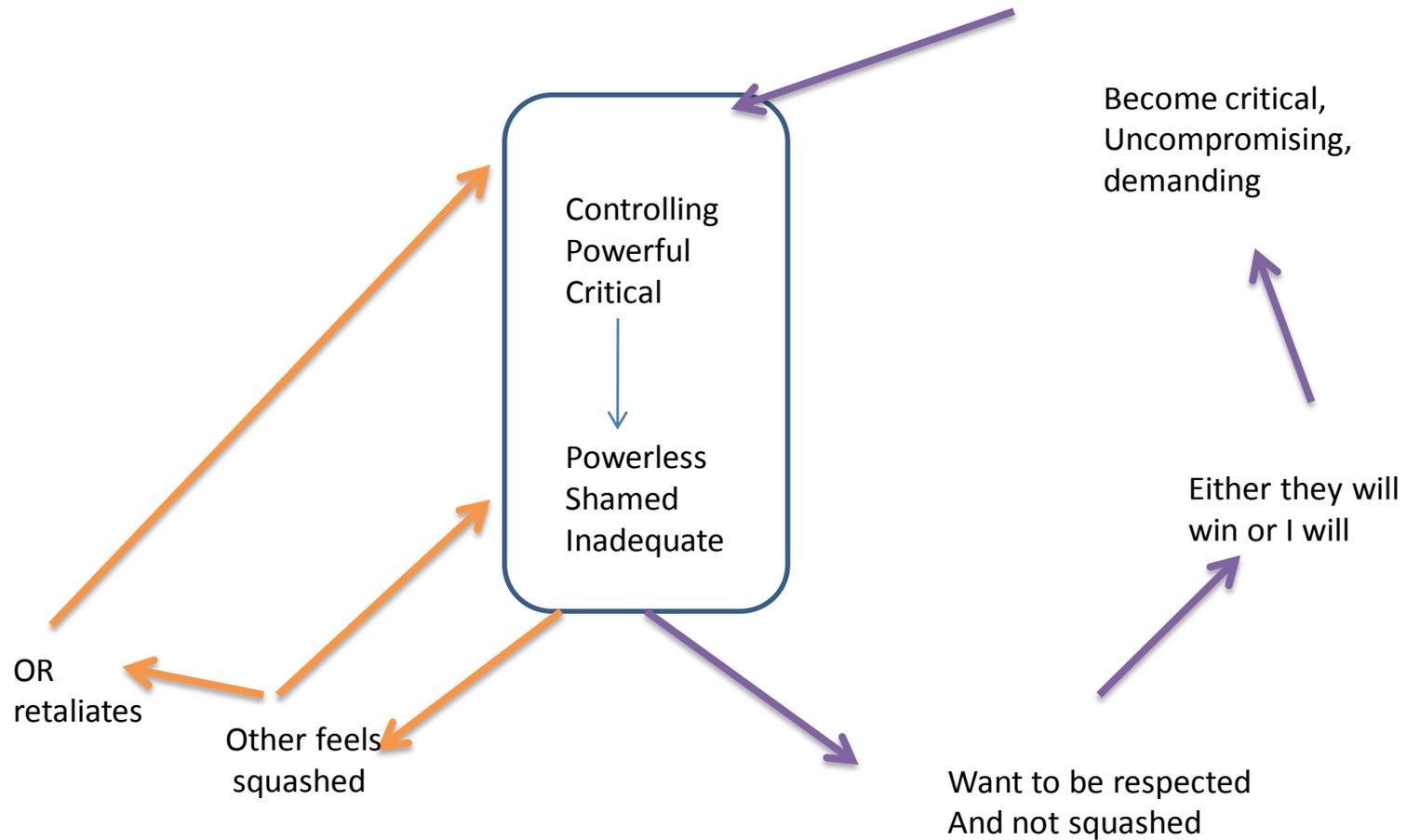
- Flexibility can temporarily be lost and we can become hijacked by a dominant inner state – when we lose our keys on the way to an important meeting
- When a system seems out to frustrate us
- When we get stuck in low mood or hyper arousal and anger.
- We regain flexibility through patterns of coping that are helpful – talking things through, humour, seeking out help or care, negotiating.
- Talk in pairs



Anger as survival strategy

- Anger usually secondary emotion
- Response to fear, hurt or shame
- Involving beliefs about loss of control, not being cared for, not valued, not heard, not safe
- “Pay attention to me” “I don’t like what you are doing” “restore my pride” “You are in my way” “I am afraid” “Listen to me”





- Just as their likely responses are affected by their wider experiences, beliefs about the world etc so are ours
- We will all have a tendency to fight back, or give in, or get anxious.
- It's the interplay between their role and ours that creates or solves problems
- Growing edge? Pairs

Skilled helper

- All of us need psychological and emotional competencies now
- In a networking, complex 'people and relationships' dependent organisation we are all in the front line
- In the face of someone else's difficulty, need or distress what is helpful and what is not helpful?

Steps in diffusing anger

- Be curious
 - Listen, want to understand, don't interrupt, don't disagree, don't make them wrong. “tell me what's gone wrong for you”, Let me see if I can understand more”, “Help me get clearer about what's happened”
- Acknowledge
 - Their concerns, feelings, experiences. “It sounds like you've had a really tough time”, I can see just how frustrated and upset this has made you”, “you've tried everything to sort this out and feel you've just been passed on again”. Don't be logical – don't evaluate who's right or wrong.

Reflect the story back to them

- Summarise
 - “Let me make sure I've got this right” “Let me see if I've understood” “So from what I hear you thought the deadline was today but now you’ve have been told was last week. You are worried about what this means for your marks and feel frustrated that this has happened”

What can we do now?

- Problem solving
 - “Lets see what we can work things out”, “I want to try to see if we can think through what to do now”
 - “I understand how difficult this is for you and it may be that we can’t fix it but lets see what the next step could be”

Non verbal communication

- Equalise it – sit down if they are, stand up if they are
- Open gestures. Hands open and slightly out
- Intermittent eye contact – too direct and it can feel like a challenge, too avoidant and it can feel like you are not listening, or are scared of them
- Soft tone, slow down, open face, relaxed muscles.

Stay Safe

- Keep the door open
- Don't block their exit
- But make sure you are near one
- Make an excuse to leave if uncomfortable – get drink of water.
- If worried or feeling unsafe simply leave without worrying about how or why.

Don't be a doormat –

- Personal bottom lines “I do want to help you, but when you shout it makes it hard to think”
- “I want to help but I don't want to be spoken to in that way”
- “I want to help but I feeling uncomfortable with this conversation right now”
- Get help from colleagues
- Talk difficult experiences through
- Make a record as needed

About the Counselling Service

We offer:

- confidential help with any personal issues affecting work, self esteem, relationships, mental health or general well being.

About Us

- Primarily brief, work focused work
- Often 1 or 2 sessions is enough
- At busy times there may be a wait for the first appointment
- Work very actively to get an initial formulation – a bit like the sketches I used earlier. To place the problem in the context of internalised relational patterns
- Then quickly focus on “now what”.

Groups Programme

Including:

- Managing Low Mood
- Managing Anxiety
- Procrastination
- Managing Sleep Problems
- Speaking Out
- Making changes
- Confidence
- Assertiveness
- Managing your boss/supervisor
- Exam stress

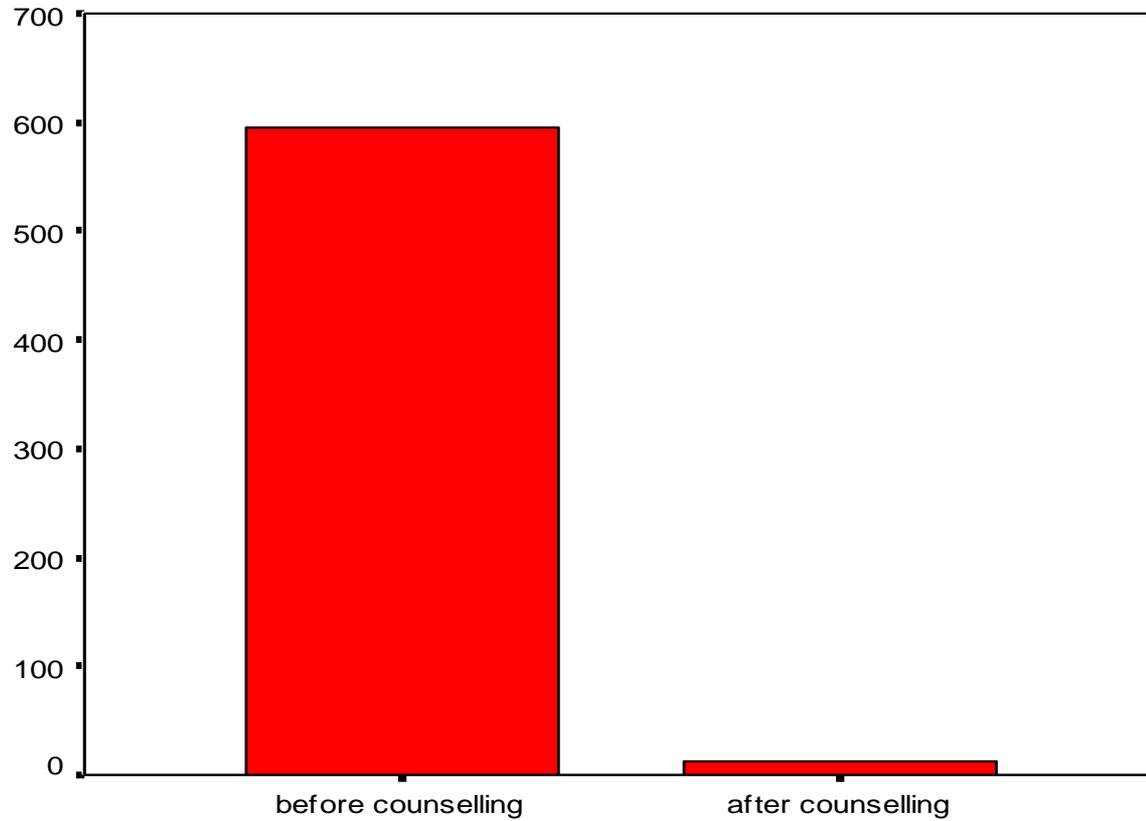
Self Help

- Being Well
- Mp3 downloads
- Links to many other useful sites
- Leaflets and handouts
- Book recommendations

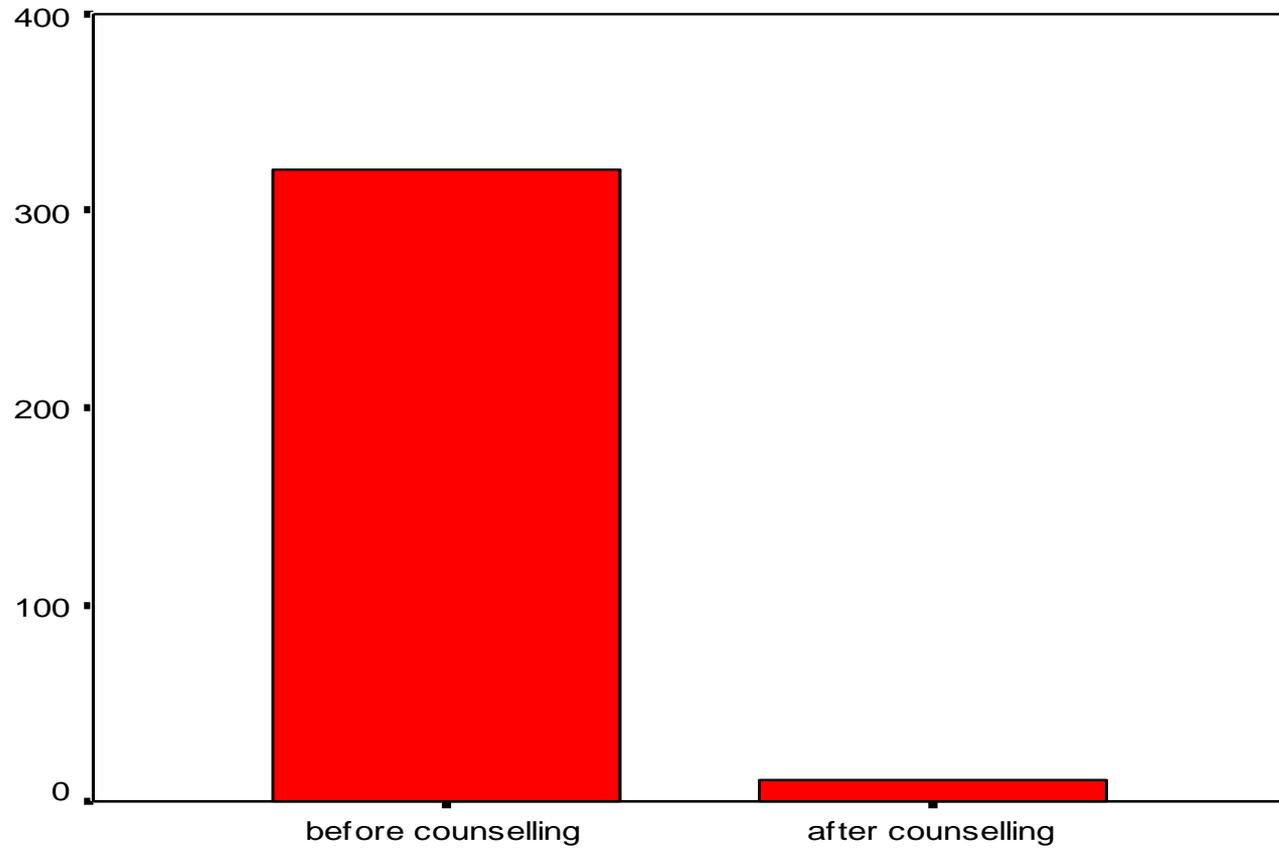
Comparisons to national data sets

- 82% of our clients score above clinical cut off (CORE) similar in severity to those presenting for primary care mental health services in NHS
- 20% are below clinical cut off – we span a wide range of presentations.
- Their post-counselling scores show that 78.33% of our clients accessing the service experienced clinical/reliable improvement

'Are your personal problems currently affecting your academic work?'



‘Because of your problems, have you thought of leaving your course?’



Where are we?

- 5th Floor, Crawford House
- 275 2864
- Counsel.service@manchester.ac.uk
- www.Manchester.ac.uk/counselling
- Open 9-4 Monday-Friday.
- Later appointments can be arranged if needed
- Workshops booked through main number or email. Held in Dover Street Building.