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**Dealing with Difficult Conversations**

Carers often have difficult conversations, need to raise sensitive, highly personal matters or will have different viewpoints about care than their loved one, wider family, friends or professional staff. You might be dealing with day-to-day care or complex issues such as working through advanced planning, making a living will, taking out finance/health power of attorney or do not resuscitate legal orders.

At PSPA we have long recognised the extra degree of advocacy and information providing those caring for people with PSP or CBD also undertake as many, including the medical community, are unfamiliar with these diseases and therefore what may be required when. These general tips can be applied to any discussion you may need to have, depending on who this is with and why.

**Planning Considerations:**

WHY – What is the purpose of your conversation? What are you aiming to achieve from it?

WHEN – Might be a good time? When won’t you be rushed or interrupted? What suits you? When are you at your best? When will you feel most ready to address this? Do you need longer to prepare? Do you need to get this out of the way or prevent something escalating?

WHERE – Is the right place? Face to face, over the phone, emailing or internet meeting? Would you prefer going to the person or for them to come to you?

HOW – How are you going to broach your concern / point / issue? Try writing down your questions or points in advance. Draft something then leave it for a while, when you go back are you happy this is what you want to say? Will you have the privacy you would like? You are not responsible for other’s reactions but how might you deal the way they respond e.g., politely end the conversation, say perhaps they need time to think, arrange to speak again when they are ready to, ask for a response back by a particular date?

WHO – Does it have to be you bringing this up? Is there another person who could on your behalf? Do you have anyone you can talk to about what you want to say before or ask to check a draft email or letter? Remember you can always call the PSPA Helpline on 0300 0110 122 to run things past one of our Helpline Care Navigators or join our Online Community via the PSPA website and post your thoughts there.

**Conversation Openers:**

The opening sets the tone for the rest of the conversation.

STARTING POINTS –

I would like to talk to you about something sensitive / that is difficult to say / might be hard for you to hear / might take me a while to get out…

We both want the best for X, let’s work out how we can help X together…

I am not sure I understand this decision, please can you explain the reason why…

I have noticed a change that I am finding challenging to get used to…

**Approaches:**

Be straightforward and use facts, present your information neutrally. This is especially important when your topic might stimulate an emotional or defensive response e.g. “I’m unhappy with the service as our last two appointments have been cancelled”.

If you don’t understand what someone is saying, for example if there is a lot of jargon being used or you can’t see what point is being made, ask if they can say it in a different way or write it to you.

Acknowledge your own feelings such as anxiety or anger might affect how you communicate, even if you tend to be calm, frustration and can show through our body language, tone of voice, eye contact and gestures.

Try to be clear about the exact purpose of the conversation and if you want an outcome, what it is.

Be curious, ask follow-up questions if you haven’t got a satisfactory response or answer.

SOLER by Gerald Egan author of ‘The Skilled Helper’ prompts effective body language:

**S** - Sit squarely and face the person that you are talking to so that we can look at them directly and show we are listening and paying attention to them.

**O** - Open posture. Do not cross your arms as this can make us appear anxious or defensive.

**L** - Lean forwards to show interest in what the person is talking about. It also means that the person can lower their voice if they wish to e.g. if they are talking about personal issues.

**E** - Eye contact shows that we are interested and listening to what the person has to say. It doesn't mean stare, but maintain good, positive eye contact.

**R** - Relaxed body language. This shows the person that you are not in a rush to get away and are letting them talk at their own pace.

ENDING POINTS –

You could ask the person to sum-up what they have said or agreed to do so it is clear all round or you could do this on behalf of you both.

If things aren’t going well or you don’t want to continue the conversation, suggest you both take a break and set another time to talk again.

Give yourself time to reflect on how the conversation went – did you say everything you wanted to, does there need to be another talk, are you satisfied with how things were left?

Consider any further steps you might want to take next.

Trust your instincts, experience and knowledge as a carer – you know your circumstances better than anyone else.

Challenging conversations can be an opportunity to grow in confidence, perhaps in ways we didn’t think applied to us, carers often say they have become more assertive as they have needed to speak on behalf of their loved one and themselves in new ways.