



Delivering Bad News Blues: Why sharing sensitive news is difficult and what we can do about it

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As speech-language pathologists (SLPs) and early childhood educators, we are used to taking an evidence-based approach when making decisions about what to do when working with young children. While research dominates some of what we do, there are other areas of our professions where we receive far less training and where there is far less evidence to support our practice. One of these areas is delivering sensitive news.

A pair of researchers from Israel, Rinat Gold (a Hanen Certified SLP) and Azgad Gold, sent out a survey to 201 Israeli SLPs to examine their attitudes and feelings about delivering negative information. 173 SLPs reported that, in their positions, they were required to break bad news to clients and so they were asked to complete the main questionnaire. In this article, we will discuss the Golds' findings from this questionnaire, as well as what we can do to make sharing sensitive news a bit easier for us and the families we work with.

Study Method

The Golds (2017) provided online questionnaires that included five sections:

1. General information about sharing bad news
2. Emotions experienced before, during and after sharing sensitive news
3. Training in the subject of breaking bad news
4. Reasons for SLPs' negative emotions when sharing sensitive news
5. Background information on the SLPs who completed the study

Participant Sample:

The survey respondents, which included SLPs and audiologists, were divided into three groups:

- 71 clinicians in the early stages of clinical experience (0-5 years of professional experience)
- 59 clinicians with intermediate stages of experience (6-15 years of professional experience)
- 43 highly experienced SLPs (more than 16 years of professional experience)

Results:

Frequency of sharing sensitive news:

- 49.7% reported breaking bad news once every several months
- 36.4% reported breaking bad news every several weeks
- 8.7% reported breaking bad news almost daily

- 5.2% reported sharing sensitive news once every several years

There was no relationship between years of work experience and frequency of sharing sensitive news, which indicates that this is something SLPs must do throughout their careers.

Opinions Regarding Training

Respondents were asked to consider the extent to which they had been trained to share bad news both during their coursework and on the job. While many respondents thought that training in this area would improve their ability to deliver bad news, they felt that they had received relatively little training in this area, with more experienced clinicians reporting the least amount of educational training in this area. Regardless of level of experience, SLPs believe that training in this area would improve their ability to deliver bad news and would impact how a recipient receives the news.

Emotional Experience Regarding Bad News Delivery

Respondents indicated that sadness and anxiety were the overarching emotions they felt before, during, and even after sharing sensitive news. More experienced clinicians did feel slightly less anxious before and during the meeting compared with less experienced clinicians.

Gold and Gold also explored possible reasons for negative emotions which included:

- Insufficient time allotted for the meeting
- Causing the caregiver to lose hope
- Experience level
- Severity of the client's condition
- The extent to which the receiver understands the news
- Dealing with the receiver's emotional responses
- The atmosphere during the meeting
- The receiver's emotional state

Conclusions of the Study

The authors suggest that SLPs value training in sharing difficult news, and that there should be a greater emphasis placed on this aspect of their jobs, both in school and once SLPs are practicing as clinicians.

How to share bad news

Let's explore the impact of our own anxiety on sharing sensitive news. I will also provide some suggestions for sharing difficult information in a way that may lead to a more productive discussion. For professionals who work with families, we cannot avoid sharing difficult information, but we can think about how we share the information.

The Impact of Anxiety

Clinicians' feelings of anxiety and sadness before, during, and after sharing sensitive news can impact how we share difficult information. Our own negative emotions can lead us to try to alter or soften the information we need to share or, to avoid sharing the news altogether. This tendency even has a name – it's called the MUM effect for keeping "mum" about bad news (Dibble & Sharkey, 2017; Dibble et al, 2013).

While it may seem tempting to soften difficult information, or to avoid sharing news all together, this is counter-productive for the recipient when the bad news is information they need. If a person is not aware

or minimally aware of a problem, it is unlikely that they will try to fix it. We need to share information and be honest about what we are seeing if we want recipients to take steps to address the situation.

Before we share sensitive or bad news, and while we share it, we may experience high levels of anxiety, which appears to be negatively correlated with empathy. This may cause us to focus on our own emotions, rather than to focus on the receiver of the news. After we share the news, when our anxiety starts to dissipate, our ability to empathize becomes stronger (Gold, 2017). So, by decreasing our own anxiety, and focusing on the recipient of sensitive news, we may be able to provide information in a way that is more empathetic.

There are strategies that we can use to plan ahead and to make sharing bad news easier when we get there.

Plan Ahead

Participants in the Golds' study said that one reason for negative emotions is that they didn't feel that they had enough time to have difficult conversations. This can be avoided by planning. When you must share sensitive news, you may want to ask yourself:

- **When can I share the news?** Find a time that works for both you and the recipient where you do not feel rushed.
- **Where can you share the news?** Ensure that you have a space that promotes privacy. For SLPs, this could be a therapy room, although you'll want to make sure you have adult-sized chairs available! For educators working in a child care centre, where privacy can be limited, you may want to ask your supervisor for suggestions, or you may even consider taking the meeting off-site.
- **Who is going to share the news?** If you work on a team, you may want to choose the person who has the strongest rapport with the recipient of the difficult news. You also need to ascertain that all the team members are "on the same page". That way the recipient will not be confused by mixed messages. Though not always possible, delivering bad news as a team may be associated with lower levels of stress (Gold, 2017).
- **What are you going to say?** Think about the words you are going to use, as well as supporting documentation to substantiate your findings. If you are concerned about a delay or a disorder, do you have evidence? If you've noticed a trend in behaviour, do you have documentation to support it? This kind of information can help you to feel more prepared, and less anxious about the information that you need to share.

While delivering the information: OWL™ and follow the recipient's lead

Our capacity for empathy is limited when we're feeling anxious, sad and stressed. Think about the recipient's perspective and pay attention to how they are feeling and what they might be thinking as you share difficult information. You can do this by remembering to OWL™ or observe, wait and listen. We know to do this with children, but it's harder to remember when we're in a stressful situation.

The benefit to using the OWL™ technique is that it gets us out of our own heads. Rather than worry about what we're going to say next, when we focus on the recipient of our news, and respond to their questions and concerns, we are actively listening. When we OWL™, we shift our focus from our own negative emotions to the thoughts and feelings of the recipient.

Here's how to OWL™ and follow a recipient's lead during a difficult conversation:

- **Observe** – when sharing news that is difficult, it is important to observe the recipient's verbal and non-verbal cues, and to respond to both. Respond to what you see. For example, if a parent looks confused, you could say, "You look confused" or if it looks like the person had no idea this was coming, you could say, "Are you surprised about what I've just told you? Then let her/him respond.

- **Wait** – this can be the hardest part. Make sure that the recipient has ample time to say what they want to say. Don't rush to respond. You also need to wait to give the person time to respond to any questions you may have posed. We tell parents to try waiting for a count of “one elephant, two elephants up to five elephants” before taking the next turn. I would encourage us to do the same, particularly after we've said something that may be hard to hear.
- **Listen** – pay attention to not just the words the participant is saying, but also to their tone of voice, which can tell us so much about how they are truly feeling.

Once we've used OWL™, we can follow the recipient's lead by:

- **Interpreting or paraphrasing what the recipient has said** – This ensures that we have understood the message that they are trying to send. You can use tentative statements such as “It seems like...”, “I'm wondering...” etc.
- **Imitating or mirroring** – This is a counseling strategy which involves copying the recipient's words, gestures or actions. When you imitate the key words or the last few words a recipient says, you are confirming that you have received the message and that you are trying to understand.
- **Commenting on the recipient's emotions** – While it may seem easier to ignore or downplay a recipient's negative emotions, acknowledging emotions by using tentative statements (“you seem frustrated”, “you sound upset”), can serve to validate the recipient and decrease their negative emotions (Leiberman et al, 2007). In counseling literature, this strategy is referred to as “affect labeling”.
- **Ask open-ended, genuine questions** – Just as we tell parents not to ask their children questions to which they already know the answer, we want to ask recipients of sensitive news those same types of genuine questions. These questions demonstrate that we really want to hear what the recipient has to say, and that we are not rushing them through the meeting.

In Conclusion

Sharing bad or sensitive news can be one of the most challenging aspects of our role and is one for which we often feel ill-prepared (Gold, 2017). While we cannot change the type of news we have to give, we can think about how we share it. When we focus on empathy and following the recipients' leads, we can decrease our own anxiety, and hopefully have more productive, meaningful interactions.

To learn more about difficult conversations, consider watching our [Sharing Sensitive News e-Seminar](#), available on demand. In that e-Seminar, you will learn about some specific strategies for sharing information with parents in a way that emphasizes active listening and promotes positive collaboration. When we share the news in a way that is sensitive, family-centred and respectful of parents' points of view, we greatly improve the chances for successful collaboration.

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