THERAPEUTIC COMMUNICATION – CLINICAL ASSIGNMENT
STUDY ACTIVITY FOR EGO DEFENSE MECHANISMS

a. Displacement
b. Reaction formation
c. Splitting
d. Regression
e. Sublimation
f. Rationalization
g. Projection
h. Suppression
i. Identification
j. Compensation
k. Minimization
l. Intellectualization
m. Repression
n. Undoing
o. Denial
p. Dissociation
q. Conversion reaction
1. intensely avoiding unwanted or disturbing feelings or information; “I’m not an alcoholic—I can quit drinking any time I want to.”
2. a person returns to an earlier, more comfortable level of developmental functioning
3. a person transfers an emotion from its original object to a substitute object; the “kick the dog syndrome”
4. a person displaces generally negative, unacceptable feelings or thoughts onto another person; blaming
5. a person acts in a way that is the opposite of how he feels
6. a person unconsciously forces certain feelings or thoughts into his unconscious
7. a person consciously excludes certain thoughts or feelings from his mind
8. a person sees the world and individuals as “good” or “bad,” “black” or “white;” “If you don’t agree with me, you must not be my friend.”
9. a person uses a logical-sounding excuse to cover up true feelings, thoughts, and behaviors; “I’m not an addict—I take all these pills for my back pain.”
10. taking on qualities of other individuals
11. a person uses his powers of thinking, reasoning, and analyzing to blunt or avoid emotional stress
12. a person covers up weaknesses by emphasizing a more desirable trait or by overachievement in a more comfortable area; “I might be too short for basketball, but I’m great in music.”
13. a person does not acknowledge the significance of their behavior; “I didn’t hit her that hard—nothing was broken.”
14. a way of dissolving feelings and actions by means of actions that negate or cancel out previous uncomfortable ones
15. channeling uncomfortable feelings, memories, and drives into healthy and creative outlets; the school bully becomes a professional boxer
16. a person channels anxiety into physical symptoms
17. a person separates painful events or situations from the conscious mind
THERAPEUTIC AND NON-THERAPEUTIC COMMUNICATION TECHNIQUES

Identify the following sentences as either therapeutic or non-therapeutic. Label each therapeutic and non-therapeutic technique. If you decide that one of the sentences is non-therapeutic, revise the sentence to be therapeutic. Label the technique you used in your revised sentence. The first one is done as an example.

T = Therapeutic
N = Non-therapeutic

1. “Let me tell you what I think you should do.”
   T
   Label – Advising
   Revision – “What do you think you should do?”
   Label of Revision – Reflecting

2. “Tell me about your fear.”
   T
   N

3. “Everything will be all right.”
   T
   N

4. “You shouldn’t worry so much.”
   T
   N

5. “Why do you feel guilty?”
   T
   N

6. “How do you feel about the problem?”
   T
   N

7. “I’d like to hear more about that.”
   T
   N

8. “You seem upset.”
   T
   N

9. “Tell me about your main concerns with your treatment.”
   T
   N
THERAPEUTIC AND NON-THERAPEUTIC COMMUNICATION TECHNIQUES

10. “If I were you, I’d be angry at her.”

11. “I don’t see an owl in the dining room.”

12. “Are you saying that you feel sad?”

13. “Why don’t you leave her?”

14. “This point seems worth looking at more closely.”

15. “What led up to your argument?”

16. “I don’t think you should go to the dance.”

17. “What are your feelings about the divorce?”

18. “You aren’t really angry, are you?”


20. “Where would you like to begin?”
After reading the communication on the left, indicate what technique the nurse has used and whether the technique is therapeutic or non-therapeutic. Use each technique only once. The first one has been completed as an example.

Giving recognition  Indicating an external source of power  Giving advice
Focusing  Voicing doubt  Belittling feelings
Verbalizing the implied  Exploring  Reflecting
Broad opening  Requesting an explanation  Rejecting
Giving reassurance  Restating  Defending

1. Pt: “The FBI wants to kill me.”  
   Ns: “I find that hard to believe.”  
   Voicing doubt  T  N

2. Pt: “The night nurse always calls me sweetie-pie. I get so angry when she does that.”  
   Ns: “Perhaps you should consider how she is feeling.”  
   ________________  T  N

3. Pt: “My daddy always tucked me into bed at night.”  
   Ns: “I’d like to talk more about your relationship with your father.”  
   ________________  T  N

4. Ns to Pt: “Good morning, Sue. I see you are wearing the hair bow you made in Occupational Therapy.”  
   ________________  T  N

5. Pt: “I didn’t really mean it when I said I wanted to die.”  
   Ns: “What makes you say those kinds of things?”  
   ________________  T  N

6. Pt: “Do you think I should get a divorce?”  
   Ns: “What do you think would be best for you?”  
   ________________  T  N

7. Pt: “Whenever I ask for a different therapy, my doctor just ignores me.”  
   Ns: “I’m sure he knows what’s best for you.”  
   ________________  T  N

8. Pt: “We always had such fun on holidays when I was growing up.”  
   Ns: “Tell me more about what it was like when you were a little girl.”  
   ________________  T  N
INTERPERSONAL COMMUNICATION TECHNIQUES

9. Pt: (Mute refusing to talk)
   Ns: “It must have been a horrible experience for you being the only survivor of the automobile accident.”

10. Pt: “I don’t think my life will ever be the same again.”
    Ns: “Cheer up. Everything’s going to be okay.”

11. Pt: “I feel like such a failure in the eyes of my family.”
     Ns: “You feel as though you have let your family down.”

12. Pt: “Do you think I should leave home and get an apartment of my own?”
     Ns: “I think you would be much better off away from your parents.”

13. Pt: “Good morning, Nurse.”
     Ns: “Good morning, Patricia. What would you like to talk about today?”

14. Pt: “I’d like to talk about my relationship with my boyfriend, Jack.”
     Ns: “Oh, let’s not talk about that. You talk about that too much.”

15. Pt: “I want to call my husband.”
     Ns: “Why do you want to talk to him after the way he treated you?”
Therapeutic and non-therapeutic communication techniques

Situation: Pam comes to the psychiatric clinic for assistance with more adaptive coping. Nurse Jones will be her primary nurse.

Match the behaviors described on the right with the essential condition for therapeutic relationship development on the left.

1. Rapport
   - Nurse Jones does not approve of Pam’s gay lifestyle but accepts her unconditionally nonetheless.

2. Trust
   - Nurse Jones and Pam develop an immediate mutual regard for each other.

3. Respect
   - Pam knows that Nurse Jones is always honest with her and will tell her the truth even if it is sometimes painful.

4. Genuineness
   - Pam knows that Nurse Jones will not tell anyone else about what they discuss in therapy unless there is a safety risk.

5. Empathy
   - When Pam talks about her problems, Nurse Jones listens objectively and encourages Pam to reflect on her feelings about the situation.
Identify the appropriate phase of relationship development for each of the following tasks. The first one is completed as an example.

a. Preinteraction phase
b. Orientation (introductory) phase
c. Working phase
d. Termination phase

1. Pam and Nurse Jones set goals for their time together.
2. Nurse Jones reads Pam’s previous medical records.
3. Having identified Pam’s problem, they discuss aspects for possible change and ways to accomplish them.
4. They establish a mutual contract for intervention.
5. The established goals have been met.
6. Nurse Jones explores her feelings about working with a gay person.
7. Pam weighs the benefits and consequences of various alternatives for change.
8. Pam and Nurse Jones discuss a plan of action for Pam to employ in the advent of stressful situations following therapy.
9. Pam cries and says she cannot stop coming to therapy.
10. Nurse Jones gives Pam positive feedback for attempting to make adaptive changes in her life.