

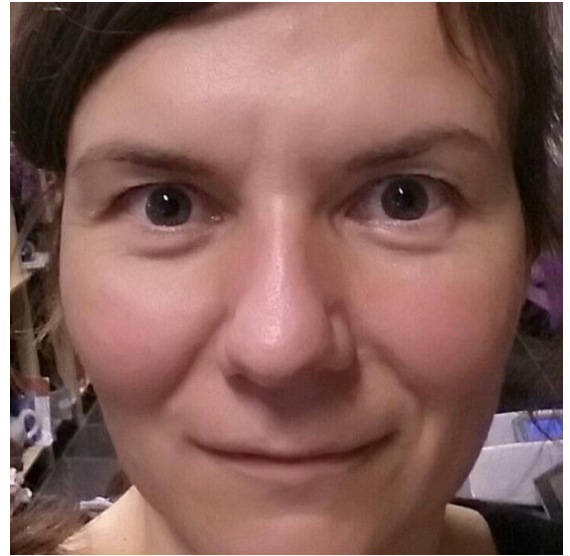


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### **Counseling/Rehab/Patient Care Role Play in Clinical Interaction**

#### **Understanding your part in the role of hearing care provider is crucial to successful client outcomes**

Like any other social interaction, the clinical interaction between a hearing care provider and a client is affected by role playing. The individuals involved enact specific roles in the interaction, emphasizing some aspects of their identity and behavior, and downplaying other aspects, much like actors play a role on stage. This role play affects the flow of information between the hearing care provider and the client in the hearing clinic. Clinical work therefore requires an excellent judge of character and a strong sense of how role play is part of every social interaction.

#### **Getting to the Truth of Client Reports and Opinions**

A client comes for a follow-up appointment and you ask her how she has been doing with her new hearing aids. "Those hearing aids are no good at all! I absolutely can't stand them." Then, after talking about other matters for a while, the client admits that she actually did try to use the hearing aids in various situations. Reflecting on this, she recalls using the hearing aids with notable benefit in a particular situation that used to be difficult before. Why this sudden change of opinion?

Another client comes to you for a follow-up appointment and you ask him how he has been doing with his new hearing aids. "Oh, yes, very well," he responds. "They're wonderful. I've been using them every day, morning to bedtime." But the hearing aids' data log shows no more than a few hours of hearing aid use per day on average. And the client fumbles helplessly inserting his hearing aids, as if he is doing it for the first time. Something is not quite right here.



#### **Role Play Is Constructive Adaptation**

In social encounters, people always enact a specific part of who or what they are. When meeting another person, people adapt their behavior to make a certain impression. They adapt this performance to the particular setting of the encounter and to the expectations of the other people present.

A hearing aid user thus enacts the role of a client or patient when he sees the hearing care

provider in the clinic. The client role requires having a request or a problem of some kind, as the reason to approach the expert, the hearing care provider. Similarly, the clinician must exhibit professionalism and expertise and provide guidance regarding the client's problem to perform the hearing care provider role consistently with clients' expectations.

In this way, social interaction is like a stage play with all the actors adapting their roles to that of other actors and to the setting, to create a coherent whole.

Role play may suggest to the reader a notion of dishonesty and hiding of the truth. On the contrary, role playing is a mode of collaboration, a constructive adaptation that serves to facilitate positive outcomes of the interaction for all participating individuals.

It has been argued that hearing care clients tend to exaggerate their difficulties before they are fitted with hearing aids to attract the hearing aid provider's attention to their problems.<sup>1</sup> Similarly, they may tend to exaggerate the improvement achieved at the final evaluation, as a way of expressing gratefulness toward the hearing aid provider. The client also may overstate the amount of hearing aid use to demonstrate compliance with the clinician's recommendations.

### **“Reading” the Role Play of Your Clients**

Social interaction involves both the staging of a certain role—the impression a person wants to give—and a simultaneous “reading” of signs in other persons' appearances and behaviors that reveal the validity of the impression given.<sup>2</sup> This implies that a person's oral statements are always contextualized by body language, facial expressions, and general appearance.<sup>3</sup> This is how adaptation of role play occurs.

With the current emphasis on client-centered hearing care, the focus of attention has shifted to the client.<sup>4,5</sup> This can be a challenge for the hearing aid provider meeting a new client for the first time.

In a focus group on hearing aid dispensing processes, British hearing care providers discussed how they often made assumptions about new clients to establish an impression of what type of client to expect and what type of hearing solution they required. The hearing aid providers were aware that their predetermined impression would often prove wrong when meeting the client. During appointments in the clinic, the hearing care providers were constantly “reading” the behaviors and statements of the client and adjusting their impression of the client. Thus, it is evident that a good hearing aid provider must be a skilled judge of character.

Experienced hearing care providers develop a strong sense of the small subtle signs in clients' behaviors and statements that disclose whether the impression the client gives is valid. The usual initial chit-chat in the beginning of an appointment serves this purpose well. One British hearing care provider explained how clients would often tell her they had been using their hearing aids all waking hours. Then, during casual chat with clients, she would indirectly signal to them that any hearing aid use pattern that satisfied them was acceptable for her. This made some clients relax and soon after cautiously correct their answers, adding that there had been occasional exceptions to full-day use of their hearing aids.

### **Role Play Facilitates the Flow of Information**

Hearing care providers also perform roles to achieve their intended aims, to an even larger extent than clients.

While the clients manage the impression they give of their own persons, the hearing care provider is in charge of the hearing rehabilitation. The provider's role play accounts for the impression that the client will have of the clinician as a person, as well as the hearing rehabilitation in itself.

In interviews discussing data logging in hearing aids, Dutch hearing aid providers said they usually checked the hearing aid's data log to verify the clients' subjective assessment of their

hearing aid use. Yet, the hearing aid providers would only bring up data logging in conversation when it could be related to constructively (ie, in solving the client's problems).

A hearing care provider depends on the information obtained about the client for doing the best fitting of hearing aids to the client's individual needs. Hence, they must build a strong and confident personal relation with their clients.

Hearing care providers also hold much information about the hearing aids and the hearing rehabilitation process—which they seek to deliver to the client in appropriate doses at the most appropriate time. Danish and British dispensing professionals in a focus group said they were very strategic about how they provided information to the client, knowing that many clients do not remember the information they receive in the hearing clinic.<sup>6</sup>

### **Building Strong Relations with Clients**

Role play in clinical interaction affects the flow of information between the hearing care professional and the client. The subtle signs that are given off and picked up between actors in the clinical interaction may lead to misunderstandings, if not interpreted correctly and acted upon. Misunderstandings can damage the relation between dispensing professional and client. There are several ways to facilitate relations between the hearing care provider and the client:

- Be observant of your own behavior and practices in clinical interaction. Evaluate which role you were playing and how you changed or adapted your own role during an appointment. What made you do so? You are likely to learn a lot—about your clients and yourself too.
- Be observant of your clients' behavior. Pay attention if your client changes his behavior and communication during an appointment. What made him do so? Was it something you did or said? Or perhaps something else?
- Make room for the less successful experiences a client may have. Be personal and empathetic.<sup>7</sup> Even if you like to appear strictly professional and errorless, do not let that make clients feel they have to be equally errorless.
- Finally, it is about being genuine: Show that you are sincere and authentic. This will make clients relax in your company. Meet and alleviate any skepticism from the client toward you by showing personal interest in your clients. Be explicit about the limitations of your service,

### **References**

1. Dillon H, James A, Ginis J. Client Oriented Scale of Improvement (COSI) and its relationship to several other measures of benefit and satisfaction provided by hearing aids. *J Am Acad Audiol.* 1997;8:27-43.
  2. Goffman E. *The Presentation of Self in Everyday Life.* London, UK: Penguin Books; 1959.
  3. Hull RH. Honing your communication skills benefits patients, colleagues, and you. *Hear Jour.* 2012;65(4):41-45.
  4. Hickson L. Defining a paradigm shift. *Seminars in Hearing.* 2012;33:3-8.
  5. Gagné J, Jennings MB. Incorporating a client-centered approach to audiologic rehabilitation. *ASHA Leader.* July 5, 2011.
  6. Margolis RH. What do your patients remember? *Hear Jour.* 2004;57(6):10-17.
  7. Clark JG, English K. *Counseling in Audiologic Practice. Helping Patients and Families Adjust to Hearing Loss.* Boston: Pearson Education Inc; 2004.
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