

Working with Families: Building trust

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An article to share with students and colleagues

We can all agree that trust is an essential component of our personal lives. Whether it's a friendship, a family tie, or a romantic partner, without trust, the relationship will suffer. But what about our professional relationships? When we ask parents to OWL and follow their child's lead, we aren't only providing them with interaction strategies, we may be asking parents to change the way they engage with their children – something extremely personal and private. In order for us to help parents, they have to trust us; they have to trust that we are competent and that we are following best practice.

As Hanen SLPs, who believe in parent/caregiver implemented intervention, you are already really good at developing trust with your families. We all know what a difference a strong partnership with parents makes in our clinical work. This article is designed to make explicit some of the things you likely do every day to build trust with your clients. We wrote it in the hope that that it could help you when working with students, new graduates or new employees.

What is trust?

Before we can think about building trust, we have to agree on a definition. One definition that seems particularly apt to speech-language pathology is that trust is "choosing to make something you value vulnerable to another person's actions" (Feltman, 2009). That's an interesting take on this concept. When parents bring their children for speech-language therapy, they are most certainly making something they deeply value – their children – vulnerable to our actions. Parents almost always lack the expertise to assess the reliability of our decisions (Ozar, 2014), and have to trust that we are making well-informed choices. Parents will be more likely to stick with a clinician, and follow through with suggestions, if they believe that the clinician is competent and caring and has their and their child's best interest at heart.

How can we build trust?

According to Brené Brown, a researcher at the University of Huston who studies trust, shame, and vulnerability, there are several components to a trusting relationship. She developed the acronym B.R.A.V.I.N.G. (2015) which stands for:

- Boundaries
- Reliability
- Accountability
- Vault
- Integrity
- Non-judgment
- Generosity

If we focus on strengthening these seven elements, we can help build trust-filled relationships with clients.

Boundaries

This means being clear about our own limitations – what we can and cannot do, as well as respecting the limits set by the family.

Setting boundaries means ensuring parents understand our scope of practice. For example, as an SLP, I can give a lot of well-researched information about language development and facilitation, but there are several topics that are outside of my area of expertise. If a parent brings up one of these topics, I am very clear about what I know, what I don't know, and where they can find more information. Boundaries also come into play when thinking about personal relationships with the families we work with. Relationship building is an essential element of speech-therapy. However, sometimes parents become so comfortable with us that they raise issues that cannot be resolved in the therapy room. For example, parents may discuss their marital problems with us. While it is important to be supportive and empathetic, it is essential to stick to our scope and practice and to suggest to parents that they seek out other forms of support. A third way to respect boundaries in our practice is to keep in mind what the family brings to the table. It means not pushing parents to do more than they can take on. For example, if a family says they can only bring their child to therapy every other week, then we need to accommodate this even if we think that a weekly session is best for the child.

Reliability

Being reliable is doing what we say we'll do over time. An essential element of being reliable involves letting parents know what we are capable of getting done, (for example, liaising with a school-board SLP over the following week) and doing it.

If we are unreliable (not fulfilling promises, being unprepared) we send the signal to the families that we work with that we cannot be counted on to do what we say we will do, which erodes their trust in us.

Accountability

This involves acknowledging our mistakes and making an effort to rectify them. For example, if I am late to meet a family, I say, "I'm sorry I'm late. I was caught in traffic. Would it be possible for you to stay a bit later so I can make up the extra time?". No one is perfect, but apologizing and attempting to rectify a mistake go a long way in building trust.

Vault

Being a vault means keeping information confidential. As SLPs, this is part of our mandate, but sometimes I forget this needs to be explicitly stated from the beginning. When meeting a family for the first time, I let them know that what they share with me is strictly confidential unless I am provided with written consent to share information. This is particularly important when filming parents. I've had families become quite worried that I would share their videos.

The second aspect of keeping therapy confidential is not sharing anything about other clients with another family. I don't share anecdotes about clients with other clients, even anonymously.

Integrity

Acting with integrity involves practicing our values and doing what is right rather than what is easy. For example, a colleague of mine told me that she was working with a father whose child clearly had significant social communication issues. She thought the child was on the spectrum and wanted to start the discussion about a referral for a developmental assessment. The father was surly and uncooperative during their sessions, refusing to be involved. This made her very reluctant to start the discussion

because she found him so intimidating. However, she eventually did start that conversation and even though the father was not at all receptive at first, she felt that she was doing what she needed to do as a clinician, which means acting in the best interests of the client.

Non-Judgment

This means keeping an open mind to what parents bring to the table. We might not agree with their values and beliefs, but we need to accept them. It also means being non-judgmental about how much support a family needs. Families should experience sincere openness and interest from us so they feel comfortable asking questions and expressing the need for help.

Generosity

In our clinical practice, generosity refers to assuming the kindest things about the words, intentions and actions of others. Rather than becoming slighted by something a parent says, we can try to interpret their actions and words in the most generous way possible.

In conclusion:

If we strengthen our B.R.A.V.I.N.G. abilities, the families we work with will respond in kind. They will be more trusting, more open to a collaborative partnership in which they are amenable to learning how best to support their child's communication and language development.

References:

Brown, B. (2015). The Anatomy of Trust. <u>http://www.supersoul.tv/supersoul-sessions/the-anatomy-of-trust/</u>

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Ozar, A. C. (2014). The Plausibility of Client Trust of Professionals. *Business and Professional Ethics Journal, 33*(1), pp.83-98.