Teaching-Learning Processes

Sandra Schmidt Bunkers, Contributing Editor

The Power and Possibility in Listening

Sandra Schmidt Bunkers, RN; PhD; FAAN

Abstract
In this column, the author describes the power of listening. There are three engaging listening modalities that are explored that form a foundation for exploring the power and possibility in listening: living true presence, participating in the council process; and engaging in strategic questioning. Several strategic questions are raised to explore the possibility of integrating these listening modalities into the nursing academy.

Keywords
council process, listening, power, strategic questioning, true presence

Listening
I wondered
Was anyone listening?
Everyone was talking.
Everyone kept talking.
It was deafening.
It was lonely.
No one was listening.

How do we teach good listening skills in the nursing academy? Do we teach good listening skills? Or, do we teach students to be proficient in responding to others in what the nursing academy terms in an appropriate manner? Recall communication classes in nursing where students were taught particular response phrases to certain situations. What was taught was the right or the wrong way to respond to a person’s question or comment. But, was deep, attentive listening taught in those communication classes?

There is so much more to listening than hearing the words of another person. So often we teach students how to respond to what another person might say instead of teaching them how to really listen to what is being said. A person must listen with a firm intention of trying to understand what the other is trying to convey. Brady (2003), in his book The Wisdom of Listening, wrote the following:

Listening skillfully is difficult. To listen impeccable, with fixed, full attention is a discipline much like meditation. It requires practice, rigor, and resolve. And when our efforts slacken, it may require forgiveness, gentleness, and sometimes a bit of creative inspiration to get ourselves back on track. (p. 1)

Brady’s comments denote the fact that good listening cannot be taken for granted. This author will explore three important ways of fostering the power and possibility in listening. Ideas from Brady’s book and other readings on the art of listening will be summarized in this column and will be discussed in light of three engaging listening modalities that foster deep listening. These listening modalities are a) the living of true presence, b) participating in the use of the council process, and c) engaging in the use of strategic questioning. These three modalities will be the cornerstone for exploring implications for teaching powerful listening skills in the nursing academy.

The Importance of True Presence in Listening
True presence involves listening to what is important to the other and listening to what the meaning of a situation is in the moment for that person. It involves bearing witness to

Professor and Graduate Department Head, South Dakota State University, Sioux Falls, SD, USA

Editor’s Note:
Submit notions for exploration in relation to teaching-learning in nursing to Sandra Schmidt Bunkers, RN, PhD, FAAN; 1119 Plum Creek Road, Sioux Falls, SD 57105; phone: (605) 335-0828; Email: tsbunkers@sio.midco.net
another’s lived experience with love and compassion. True presence is foundational to attentive listening. Parse (1998) defined true presence as “a special way of ‘being with’ in which the nurse is attentive to moment-to-moment changes in meaning as she or he bears witness to the person’s or group’s own living of value priorities” (p. 70). True presence “is an interpersonal art grounded in a strong knowledge base reflecting the belief that each person knows the way somewhere within self” (Parse, 1990, p. 139). In living true presence in being with another, “the person’s quality of life shines through the moment as the person tells and does not tell of the significance of situations, relationships, and hopes and dreams as he or she is living them” (Parse, 1994, p. 18). The experience of true presence “is weaved somehow with the fabric of one’s life as lingering presence” (Parse, 1994, p. 19). Parse (1998) suggested that to be with another in true presence both “preparation and attention are essential” (p. 71). Preparation in living true presence involves “an emptying to be available to bear witness to the other or others” (p. 71). Parse stated, “Attention is focus. To attend to is to focus on the moment at hand for immersion” (p. 71). Immersion in the moment with true presence is critical to attentive listening.

A variety of literature on listening substantiates Parse’s notion that preparation and attention are needed in true presence and in attentive listening. Longaker (2003) suggested that attentive listening involves what we bring to a situation where we want to support and understand another and it is “our loving presence” (p. 7). This loving presence is reflected in how we are as a person and our “ability to acknowledge and then release our fears and expectations, remaining compassionate and receptive toward the other person” (p. 7). Longaker (2003) suggested that we “listen in silence without interrupting. Fill any spaces of silence between you with love, with silent permission for the other person to go on and to go deeper” (p. 15). Feldman (2003) posited that silence “is a definition of intimacy and trust. The silent moments we share with people we love and are deeply connected with are an expression of a mutual acceptance, confidence, and understanding” (p. 046). The importance of being silent and being there with an attitude of love and acceptance as part of attentive listening and presence implies that we are comfortable with ourselves and our humanuniverse existence. Helminski wrote (1992) “Presence signifies the quality of consciously being here . . . Presence is the way in which we occupy space, as well as how we flow and move. Presence determines the degree of our alertness, openness, and warmth” (p. viii-ix).

Three examples in the literature that depict the importance of true presence in listening include Parse’s (2008) humanbecoming mentoring model, Bourne’s and Ferguson-Paré’s (2007) humanbecoming 80/20 professional development model for nurses, and Bunkers, Nelson, Leunning, Crane, and Josephson’s (1999) health action model. Parse (2008) described her humanbecoming mentoring model as “a moment-to-moment unfolding of scholarly togetherness-aloneness in the indivisible, unpredictable, everchanging pattern of coming to know the new. It is lived in moments of presence, as messages are given and taken among persons with common interests” (p. 195). The processes of the mentoring model include impelling gentle urging, attentive respecting, and affirming distinction (Parse, 2008, p. 197). Impelling gentle urging is “explicit-tacit confirmation with speech, silence, movement, and stillness” (p. 197). It involves “deliberate availability and being there without judging” (p. 197). Attentive respecting “is honoring disclosedness. It involves communing with regard and potentiating choosings” (p. 197). “Affirming distinction is thoughtful acknowledgement with the wisdom of witness” (p. 197). It includes “prudently endeavoring and recognizing success” (p. 197). These processes of the humanbecoming mentoring model are lived with true presence with stillness and attentive listening. Parse (2008) posited, “Mentoring is presence with presence cocreated in moments where a common interest joins mentor and protégé in a unique relationship. It arises with committing with enthusiasm to a diligent loving presence in venturing with the new” (p. 198).

Attentive listening with true presence is foundational to the humanbecoming 80/20 professional development model for nurses. Bourne and Ferguson-Paré (2007) noted the following:

This model is a professional development model in which nurses spend 80% of their salaried time in direct patient care and 20% of their salaried time on professional development—including focused mentorship and learning about patient-centered practice guided by the human becoming nursing theory. (p. 237)

In evaluating this model, Bourne and Ferguson-Paré found that staff satisfaction on the study unit was higher than all other hospital staff (N = 20) in the database. Key ideas from the staff who had been taught about the theory of humanbecoming and true presence included the following: “Learning about being with people differently; acknowledging the individual’s reality; using respectful language, not labeling people; clarifying meaning” (Bourne & Ferguson-Paré, 2007, p. 247). The power and possibility of true presence with attentive listening is manifested in these key ideas from the staff of this project.

The health action model (Bunkers et al., 1999), “is an advanced practice nursing model based on nurse theorist Rosemarie Rizzo Parse’s human becoming school of thought” (p. 92). With the health action model nursing practice is based on humanbecoming and living true presence. “The intent of advanced practice nurses . . . is to connect in true presence with persons and communities and to understand their health experiences with connections-disconnections and their hopes for changing patterns of health” (p. 96). Nurses attentively listen to persons as they talk about their personal health descriptions. The personal health description describes in the persons or community’s words the following:
What life is like for me now...

My health concerns are...

What is most important for me now...

My hopes for the future are...

My plans for the future are...

My specific health action plan is... (p. 97)

The importance of living true presence with attentive listening in the words of one of the persons working with health action model nurses. Williamson (2000) wrote: “My name is Jean Williamson... I am the homeless person. Because of the true presence that Dr. Parse’s theory teaches, and the way D. lives it, I have become more of who I really am. Because of her non-judgmental attitude, somewhere in the process I found hope” (p. 127). Williamson described living on the street and her first health description:

I was living on the streets when I did the first Health Description, so all the answers to the questions involved staying sane and safe. But even more important than those issues was the fact someone cared about my present and my future. This experience of creating my own Health Action Plan brought the issues of accountability and responsibility to the forefront. I’ve never considered myself either of these and I am gaining an understanding that accountability is standing tall and saying, ‘This is who I am and this is what I believe.’ Responsibility is choosing to follow the best plan for me. All this came about because of my experiences of being validated; I am the expert of my own life. (pp. 127-128)

What a profound statement of the power and possibility in listening.

The Importance of the Council Process in Listening

Zimmerman and Coyle (1991) wrote about a process that could evoke a state of focused listening. They called it the council process. They suggested that the roots of council “can be found in Homer’s Iliad where a talking wand was used by a gathering of men to resolve the bitter dispute between Achilles and Agamemnon” (p. 80). The council process can also be traced to Native American traditions, such as pueblo elders or the League of the Iroquois, as well as intentional communities such as the Ojai Foundation in Ojai, California.

At the Ojai Foundation council “has become the principal practice supporting group interaction, conflict resolution, story telling, decision making, and co-visioning” (p. 81). The process of council is quite simple. A group chooses a leader (one or two) and the group sits in a circle with a candle or some meaningful object in the middle to help the group keep focused. A talking stick is selected. A talking stick can be a carved statue, a flower, a feather or some object that is meaningful to the group. The talking stick is passed around the circle in a clockwise direction. The rule is that you “can talk only when you hold the talking stick in your hand” (Zimmerman & Coyle, 1991, p. 81). The authors suggested that three simple rules be set for council: “Speak honestly, be brief, and listen from the heart” (p. 80). One of the “great challenges is to not be thinking about what you’re going to say until it’s your turn to speak” (p. 81). Council leadership focuses on developing an interconnectedness of the circle. The council leader is “based in the shamanic tradition where the council leader ‘like the shaman, is fully on the journey with each member of the circle, facing all the dangers of being personally vulnerable’” (Zimmerman & Coyle, p. 84). Zimmerman and Coyle (1991) suggested that “The council leader’s authority arises out of personal authenticity, extensive experience, and training... A truly successful council is an authentic one, no matter how dark or unresolved the outcome” (p. 84).

Following are two examples in the literature that magnify the importance of the council process in transforming institutions and individuals. Bunkers and colleagues (1992) designed a nursing education-nursing service project called The Healing Web, which sought to “integrate not only nursing education and nursing service, but also to bring together private and public education systems involving baccalaureate and associate degree nursing programs” (p. 68). The project addressed differentiation of nursing practice. The group “designed a model nursing unit at Sioux Valley Hospital for clinical instruction of 2-year associate degree nursing students and 4-year baccalaureate nursing students to be educated in the complementary roles of associate and primary nurses in a differentiated nursing practice model” (Bunkers et al., 1992, p. 69). The concepts of transformation and reconciliation were kept in mind as the project was developed. The council process became a very important communicative planning process for this project group. Nurse theorist Margaret Newman’s theory of health as expanding consciousness was used in the development of the philosophy of The Healing Web and encompassed the central belief “that nursing is relational” (Bunkers et al. p. 71). The council process was used by the core planning group of The Healing Web as a relational planning and implementation process. The council process was used to build trust among the project members. Bunkers and colleagues (1992) stated the following:

The Council Process has been an extraordinary help in developing open dialogue, and it appears crucial to the process of the project. It is in the silence when everyone is listening and one person is speaking that much...
is understood, and this new sense of understanding is transformative . . . Thus, the Healing Web project
gives new vision to nursing education and service,
through the use of ancient traditions blended with
nursing theory and research. (p. 71)

The power and possibility in listening.
Halifax (2003) described the use of the Council process
with a group who participated in the Auschwitz Bearing
Witness Retreat. This group “journeyed to Auschwitz . . . to
bear witness, to listen deeply within the walls of the camp
which, for many of the world’s peoples, calls up some of the
most horrendous memories of degradation and human suffer-
ing” (p. 134). One of the ways the group practiced bearing
witness was in the experience of Council, “a practice in which
people sit in a circle with each other, speak clearly and listen
deeply” (p. 135). In the use of the Council process the group
emphasized speaking from the heart, listening from the heart,
and being of lean expression. Speaking from the heart means
“being in one’s personal truth in this moment” (p. 138).
“Listening from the heart is deep listening—listening in the
true spirit of tolerance, with a vast and open heart. The
Quakers call this devout listening” (p. 138). Being of lean
expression means learning to be concise. “Learning to be
concise is a discipline; it is a practice that reminds us that all
the voices want to be heard” (p. 140). Halifax (2003) sug-
gested that in the use of Council, the group developed an
appreciation for differences in views and experiences of
people who were German or Jewish, men and women, rich
and poor, and young and old. The group “saw clearly that it
was the intolerance of differences that was a prime cause for
Auschwitz” (p. 136). Halifax (2003) posited that during the
retreat, with the help of the Council process, persons said it
was “a way of clear and concise speaking from the very bones
and marrow of our being” (p. 140). It is important to share
personal stories, but also to listen openly to the stories of others
that are shared in Council. In the practice of Council, individu-
als are asked to “move from the position of / and to listen to the
wisdom of the circle” (p. 141). Questions that surfaced from
the retreat at Auschwitz included the following:

Can we bear to listen to others and hear what we have not
confessed to ourselves? Can we hear what we do not
know? Can we stir the ocean with the broken stick of our
aspirations? Can we free all creations? No one answer
can hold the truth of a good heart. (Halifax, 2003, p. 141)

The Importance of Strategic Questioning in Listening
Questions are Tools for Rebellion,” wrote about how strategic
questioning can be used for social change. She suggested that
at the core of strategic questioning was dynamic listening.
Peavey (2003) stated the following:

I have been working on the concept of strategic ques-
tioning for some time as a way of facilitating
“dynamic” listening. I also call this experiment in the
developing field of communication theory “communi-
cation of the second kind,” since it is a special kind of
communication. It creates new information and uncov-
ers deep desires of the heart rather than communicat-
ing information already known. (p. 169)

This type of communication of the second kind fosters cre-
vativity and active participation in planning for the future. Key
elements of communication of the second kind that involve
strategic questioning include synthesizing new information,
creating energy for change, releasing blocks to new ideas,
and creating visionary forces for cocreation of the new (Peavey,
2003). The shift in perspective that is achieved with strategic
questioning is “becoming a creator, rather than a receiver,
of solutions” (p. 171). What would happen if the key questions
someone would ask were framed with the question “I wonder
what we can do to change this situation?” and then listened
carefully for the answers to emerge and helped the group
begin to work for change?” (Peavey, 2003, p. 171).

Strategic questioning has eight key features that help in
shaping questions. First, motion is created with a strategic
question. Peavey (2003) used an example of Tai Chi in
explaining this feature. “Tai Chi says that if you meet and
move with the energy of the obstacle coming at you, taking the
energy from the other, then motion in a new direction emerges.
Both parties end up in a different place” (p. 173). Peavey
gave the example of asking a community group who was working
on the issue of a polluted river, “What would you like to do to
clean up the river?” (Peavey, 2003, p. 175).

The second key feature of strategic questioning is that
options are created with strategic questions. A strategic ques-
tioner would encourage individuals and groups to look at as
many options as possible. It is important to look at all the
possibilities (Peavey, 2003). Thirdly, in strategic questioning
one avoids asking “Why?” Why questions often put people
on the defensive instead of creating “a more active forward
motion on the issue” (Peavey, 2003, p. 176). Instead of ask-
ing a why question, focus on what can be done in a situation.
The fourth key feature of strategic questioning is avoiding
asking yes and no questions. “A strategic questioner
rephrases their queries to avoid the dead end of a “Yes” or
“No” reply” (Peavey, 2003, p. 177).

The fifth feature of strategic questioning is that “a strate-
gic question is empowering. A strategic question creates the
confidence that motion can actually happen” (Peavey, 2003,
p. 177). Peavey stated that one of her favorite questions is,
“What would it take for you to change on this issue (p. 177)?
Asking this type of question gives the person the opportunity
to create new possibilities for themselves and for others. The
sixth feature of strategic questioning is asking the unaskable question. “A strategic question is often one of these “unaskable” questions. And it usually is unaskable because it challenges the values and assumptions that the whole issue rests upon” (Peavey, 2003, p. 178). An example that Peavey gave on asking the unaskable question is the fairy tale of the emperor’s new clothes. It was a child that asked the question “Why doesn’t the emperor have any clothes on?” (Peavey, 2003, p. 179). Others were hesitant or afraid to confront what they saw—the emperor without his clothes.

The seventh feature of strategic questioning is that a “strategic question is a simple sentence. The question enters a mind like a diver slips into water” (Peavey, 2003, p. 180). Peavey suggested that in such questioning “it is important to have an assumption of health and the desire to find health” (p. 180). A simple sentence can get at the heart of an issue that has been avoided. The final feature of strategic questioning is that “a strategic question respects the person . . . So strategic questioning assumes that there is something that everybody can do. And it assumes equality” (Peavey, 2003, p. 181). The use of strategic questioning implies respectful, attentive listening. It implies exploring for new truth. Peavey (2003) noted the following:

There are times when we truly listen—usually when we sense ourselves to be in danger. We stop in our tracks, our ears prick up, and we listen as if our lives depend on it. The listening required for strategic questioning is like that; we need to listen as if someone’s life depends on it, because it may. (p. 187)

An example of how elements of strategic questioning were used to save and transform people’s lives can be seen in the autobiography of Nelson Mandela (1994) entitled, Long Walk to Freedom. Brookfield (2008) pointed out that Mandela used radical questioning to reflect on his assumptions concerning majority rule in South Africa. Brookfield (2008) stated, “Mandela’s autobiography, although it contains musings on tribal loyalties, responsibilities, and family ties, is centrally focused on understanding the workings of power and a continuous questioning of assumptions concerning the best way to usher in majority rule” (p. 96). An example of Mandela changing his ideas through critical questioning that Brookfield gave is Mandela’s change of position on the following assumption: “The Struggle for Black Liberation Must Be Conducted By Black South Africans Alone” (p. 98). Mandela had insisted that the African National Congress (ANC) not admit white groups that were also working against apartheid. This position was based on the premise that white members would be viewed as leaders—due to the superiority rule present in South Africa at the time. In his biography, Mandela reported on the many passionate conversations he held with sympathetic white members of the ANC. Through constant questioning and conversation, Mandela changed his position, and was convinced that white Communist ANC members would contribute greatly to the struggle for freedom. Brookfield posited the following:

Mandela was prompted to re-examine his assumptions about working with Communists after reflecting on his own autobiographical experiences. The success of the mass action of March 1950, where more than two thirds of African workers stayed at home, was clear to Mandela, and he was forced to acknowledge that Communists had played a significant part in conducting this mass action. (p. 100)

Continual strategic questioning influenced Mandela to change his tactics on his long walk to freedom. Through questioning his own assumptions and through critical reflection and listening to himself and others, Mandela’s tactical changes supported the successful fight for freedom for Black South Africans.

Another example of the use of strategic questioning in building new and transformational systems is in the area of healthcare management. The Informed Decisions Toolbox (Rundall et al., 2007) is “an integrated set of tools that assists healthcare managers and policymakers in finding and assessing research evidence and in adapting and applying research evidence to important decisions in their organizations” (p. 328). There are six steps in the decisioning process that facilitate managers taking control over the decision-making process. The six steps are: “1) framing the question, 2) finding the sources of information, 3) assessing the accuracy of the evidence, 4) assessing the applicability of the evidence, 5) assessing the “actionability” of the evidence, and 6) determining if the information is adequate” (Rundall et al., 2007, p. 328).

The key step in this organizational decision-making is to “define the questions underlying the decision—that is, what does the manager need to know to make the best possible decision” (p. 328)? As noted earlier, strategic questioning is about action and asking “what actions need to be taken to facilitate transformation?” Listening to the questions and listening to the evidence and evaluating the evidence can be productive approaches for change. Rundall and colleagues (2007) concluded that, “With our students and faculty, we are embracing implementation of a questioning organization. . . every organization should address where and how these research decision-making competencies might be acquired and used throughout the entire organization” (p. 342).

The power and possibility in listening.

The Power of Listening—Curriculum Possibilities for the Nursing Academy

In exploring the above three listening modalities of living true presence, engaging in the council process, and using strategic questioning, there are the following strategic questions that surface as curriculum possibilities:
How would a nursing curriculum be constructed that based communication instruction on nursing theory-guided education and practice that included living true presence? What values would be taught that go beyond communication skills?

What would happen to students and nursing faculty if the council process was taught to both undergraduate and graduate students? How could the council process be integrated into faculty meetings and student learning experiences?

How could strategic questioning become part of the education of nurses? How could strategic questioning be implemented in a nursing curriculum?

How can the power and possibility in listening be captured for the nursing academy?

References


