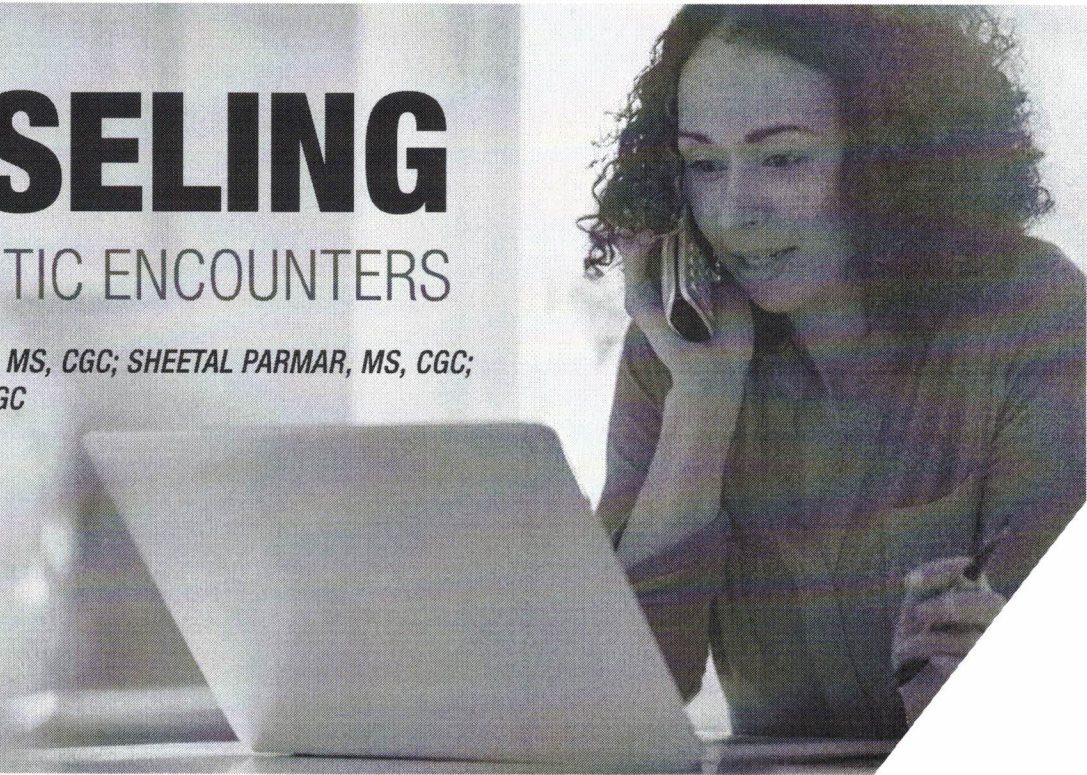


COUNSELING

AND TELEGENETIC ENCOUNTERS

BY NANCY STEINBERG WARREN, MS, CGC; SHEETAL PARMAR, MS, CGC;
AND PATRICK L. WILSON, MS, CGC



As the genetic counseling profession evolves, methods for interacting with clients are expanding. Telegenetics includes providing services via telephone, two-way video conferencing, or text/chat. Used on their own or to supplement traditional face-to-face counseling, these methods can overcome barriers of geography, transportation, and stigma. However, telephone interactions can be particularly prone to miscommunication. The tone, pace, pauses, inflection, and other characteristics of a person's voice, as well as the words used, may be the only cues available to assess a person's interest and understanding in what a genetic counselor has to say, and for building trust between the client and provider.

Genetic counselors must be mindful to apply cultural competence skills (building respectful and responsive relationships and trust in cross-cultural interactions) in every

encounter medium. COUNSELING is a 10-point mnemonic approach to cultural competency in genetic counseling practice (1):

C=Client-centered: the client's agenda comes first

O=Open: accepting of varied health beliefs and perspectives

U=Unconditional positive regard: do not judge

N=Non-directiveness: summarize all options

S=Self-awareness: recognize strengths and weaknesses

E=Empathy: seeing the world from the client's perspective

L=Listen: focusing intently on what the client says

I=Inclusive: interacting with diverse individuals using adaptations such as interpreters

N=Non-verbal: noting how clients express their needs and understanding without words

G=Genuine: authenticity facilitates deeper connections with clients

While offering a more convenient client-centered mode for clients, telegenetics has unique challenges. The following telephone counseling case demonstrates use of COUNSELING skills.

Ms. H is a patient whose doctor ordered carrier screening through XYZ Genomics Laboratory. She has a phone appointment to review her test results with Ellen, the genetic counselor. Ellen calls Ms. H and after 20 seconds on the phone, Ellen becomes flustered. She is having a difficult time understanding Ms. H's accent, and Ms. H seems to be in a place with loud background noise. Ellen is uncomfortable and knows she is not listening effectively. While her inclination is to ask one of her colleagues to handle this phone call, she takes a deep breath and says, "Ms. H. I wonder if you could speak a little more slowly, please? And, is it possible to move

Ellen is self-aware that it is her weakness making this interaction more challenging and time-consuming.

to a quieter area?" Ellen expects Ms. H to respond right away, but there is a long pause. Ellen adds, "I'm so sorry, Ms. H, this must be frustrating, but I am having a little difficulty understanding you. If you would be so kind, it would help me if you could slow down just a bit. It may take us longer, but I want to be sure we are clear on your carrier screen results. Thanks for your patience!"

Ellen explains Ms. H's test results, making a point of modeling the communication pattern she requested by speaking slowly, clearly, and concisely. By the end of the call, Ellen realizes she has overcome her fear of not understanding Ms. H's accent and can listen to the patient. Ellen ends the call by saying, "Thank you for moving to a quieter place and taking time to talk with me today." Ms. H thanks Ellen for her honesty and patience. This telephone interaction reinforces the shared goal of helping Ms. H fully understand her genetic testing results. Ellen demonstrates cultural competency by incorporating COUNSELING skills:

1. Ellen **listens** closely, recognizing she is struggling with Ms. H's accent.
2. Ellen pays attention to **non-verbal cues**, especially

the conversational pause. She follows the pause by expressing empathy for the frustration Ms. H may feel from needing extra time and effort to communicate effectively.

3. Ellen is **self-aware** that it is her weakness making this interaction more challenging and time-consuming.
4. Rather than avoid challenging telephone interactions, Ellen demonstrates **unconditional positive regard** and **inclusivity**, focusing on the content and delivery of Ms. H's words.

5. Ellen **genuinely** admits her inability to adequately understand and respectfully asks Ms. H for help.

6. Ellen is **open** to working with non-native English speakers. By treating our culturally diverse clients with genuine respect for who they are as individuals, genetic counselors build effective relationships and cultural competency. ●

REFERENCE:

1. Warren, NS and Wilson, PL. (2013). COUNSELING: A 10-Point Approach to Cultural Competence in Genetic Counseling. Perspectives in Genetic Counseling Q3, p. 6-7.



Nancy Steinberg Warren, MS, CGC, received the 2013 NSGC Cultural Competence Award and the 2009 JEMF Award for her work in promoting diversity by increasing cultural competence among genetic counselors. She maintains the Genetic Counseling Cultural Competence Toolkit website and CEU-approved course, and engages in education and training for students and professionals in the field.

CONNECT WITH NANCY:   



Sheetal Parmar, MS, CGC, is the senior director of clinical genetic services at Natera. She was formerly a task leader for the NSGC Diversity Workgroup, a project advisor for the Genetic Counseling Cultural Competence Toolkit, and is currently co-chair of Women of Natera, an employee resource group dedicated to supporting an organizational culture of inclusion and diversity.

CONNECT WITH SHEETAL:  



Patrick L. Wilson, MS, CGC, is a prenatal genetic counselor at the Prenatal Diagnostic Center in Oklahoma City, OK. He is a 2001 graduate of the Howard University Genetic Counseling Program and has been active in increasing cultural competency within the profession.

CONNECT WITH PATRICK:  