



Understanding Clients' Learning and Communication Styles

Article by Roxanne Hawn

Glitches in communication, comprehension and compliance may start with how different people learn, including how they best receive and share information. While casual discussions of learning styles typically list four options (visual, auditory, kinesthetic or reading/writing learners), true comprehension that spurs action can be much more complicated.

How learning styles map out

Experiential Learning Theory (ELT) describes nine learning styles that consider how people first grasp then transform information into action.¹ Some people lean toward concrete experiences (CE) or abstract conceptualization (AC). They, then, combine that with either reflective observations (RO) or active experimentation (AE):

1. **Diverging (CE, RO)** – These learners do best looking at concrete situations from different points of view, so they like to gather a lot of information and tend to be imaginative and emotional.
2. **Assimilating (AC, RO)** – These people are good at taking a wide range of inputs and distilling everything into a concise and logical form. They tend to value ideas and logic over people and may prioritize the soundness of a theory over its practical uses.
3. **Converging (AC, AE)** – These learners are strong at putting theories to practical use. They are good problem solvers and decision makers. They prefer technical problems over emotional or interpersonal ones, so they are willing to try new practical applications to see what works better.
4. **Accommodating (CE, AE)** – These people learn best through hands-on experience. They like carrying out plans and rely more on information received from people than their own analysis of a situation. They like partnering with people and testing approaches in the field, so to speak.
5. **Northerner (CE, AE, RO)** – These people have trouble conceptualizing and drawing meaning from experience.



They may learn in a discontinuous way and seem disorganized in their thinking and understanding.

6. **Easterner (RO, CE, AC)** – These learners bring deep reflection and orient mostly to feelings and conceptual inputs. However, they struggle to put plans into action because they get too caught up in how they're feeling about a situation.
7. **Southerner (AC, AE, RO)** – These people bring well-developed conceptual and analytic abilities. They can use both reflection and action, but they may be somewhat detached from their feelings.
8. **Westerner (AE, CE, AC)** – These learners are strong when it comes to acting and take their information from both conceptual analysis and intuitive experience. They bypass concrete experience and go directly from feelings to conceptualizing information. Sometimes, this means the framework from which they act may be unclear.
9. **Balancing (integrates AC and CE and AE and RO)** – These people fall right in the middle of all the styles.

To help break down the misconception that learning types exist as categorical blocks, think about them as continuous positions on a nine-block, directional grid.

How learning styles might look in the exam room

You may recognize yourself in the descriptions of different types of learners. Understanding these strengths and weaknesses can also help you watch for how different learning and communication styles along the continuum might show up in a veterinary exam room. For example, if you have a client who brings a lot of information, imagination and emotion into decisions about pet care, then he or she is likely a diverging style learner. If another client seems blunt and simply wants you to cut to the chase, so to speak, then you may be looking at an assimilating learner. Or, if you know people who are prone toward jumping into action based on emotion without a strong framework for their pet-care decisions, then you may be working with a Westerner style learner.

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How to use the Teach-Back Method

Some human and animal healthcare providers use a communication protocol called the Teach-Back Method, where you test how well you explained something to a client. Essentially, you stop and ask clients to repeat back to you what they understand about their pet's health and what you recommend doing about it. Rather than waiting until the very end of the appointment, stop periodically to "chunk and check" understanding before continuing the conversation.

However, people with different learning styles may not be able to grasp every detail or may not be able to articulate what they do or don't understand on the spot.

To supplement your conversations, you can use take-home reading materials, but be sure to underline or mark the most important points. It's more likely people will read the materials at home if you emphasize what's covered. And, never assume people read what you send home. Take-home materials are not a substitute for other methods of client education.

If it feels too daunting to think about using the Teach-Back Method with every exam, consider starting with your very last appointment of the day so that you don't feel the pressure of the next appointment. You could also practice it in low-pressure appointments such as puppy or kitten visits or wellness exams. Or you may decide to save this method for only your most complicated and critical cases where solid communication is vital—knowing that if you can use it then, you can use it anytime as needed.

How effective communication improves care²

Effective communication builds relationships, allows a good exchange of information, and actively includes people in decision making. People judge communication skills as an indicator of your general competence.

Good communication also helps people deal with their emotions so that they are in a better place to understand information, and it helps you understand clients' needs, perceptions and expectations. And, finally, good communication leads to greater satisfaction with care, encourages the sharing of pertinent information that allows for accurate diagnoses, and supports compliance with prescribed treatment.

References:

¹ "Learning Styles and Learning Spaces: Enhancing Experiential Learning in Higher Education," *Academy of Management Learning & Education*, 4:2: 193-212, 2005

² "Doctor-Patient Communication: A Review," *The Ochsner Journal* 10:38-43, 2010



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How Different Learning Styles Might Look in Veterinary Scenarios

<p>NW Accommodating</p> <p>Want hands-on instruction in the exam room for any at-home care needed and likely want to feel that you consider them valued partners in pet care</p>	<p>N Northerner</p> <p>May need you to help them see important connections between what's happening with their pets and your recommendations</p>	<p>NE Diverging</p> <p>Remember that these clients are considering a lot more in their heads and hearts than you may see, and they may need help hearing your advice amid the noise</p>
<p>W Westerner</p> <p>May jump into action before fully understanding things, which means they may try home remedies or follow online advice before contacting you</p>	<p>Balancing</p> <p>May need different types of information and support based on the situation at hand</p>	<p>E Easterner</p> <p>May more likely experience stress lock at points of decision, so may need time and help to set aside emotion and think clearly</p>
<p>SW Converging</p> <p>Focuses on tactics and actions and may not need as much hand-holding or emotional support</p>	<p>S Southerner</p> <p>Likely come across as practical, effective caretakers of pets and may not express as much emotion as others</p>	<p>SE Assimilating</p> <p>Probably good at lively arguments and may get too caught up in logic games before acting</p>