President’s Message

by Lori Joubert

Why listening? Why listen?

¿por qué escuchar, pourquoi écouter, warum Zuhören, kyon sunana, lema lakshiv, waarom luisteren

Listening is hard work. When we learn more about what is involved when we listen this is easier to understand. As ILA President this year I worked to maintain a focus on listening and our connections. The quality of our relationships matters, the quality of our listening matters and how we move forward in the world as listening professionals matters. My intention this year was to bring us together more, acknowledge our diversity, keep us moving forward, celebrate our contributions and have fun! The number of hours spent on Zoom, phone, and email across multiple time zones is countless. Like many of you who care deeply about the ILA and listening work, we are often willing to go great lengths in volunteering our time for this cause. It is truly a pleasure to serve the ILA with you and advance listening across the globe!

If you participate in ILA activities you might be aware that our membership is growing, our programs are developing and we are learning to be a solid virtual international community of listening teachers, leaders, researchers, artists, trainers and more. We have working teams (formerly called “committees” or “working groups”) that are collaborating on projects to improve listening in their respective fields of Business, Education, Healthcare, Research and Diversity. Additionally, the board’s leadership strategy works this year opened the opportunity to build strategy groups supporting ILA sustainability, continuity, and leadership initiatives. The strategic planning
process is complex and requires thought and input from both internal and external sources. The new ILA strategy groups (shown below) continue to clarify the ILA strategic plan. We are delighted that the ILA is very well positioned to take the association’s services to the next level! We look forward to sharing the plan with you once finalized.

A special note of thanks to Philip O’Meara for his facilitation of our ILA Strategy Group work.

On a personal note, one of many highlights for me this year is our ILA Past Presidents Virtual Gathering in early December. We had eighteen past presidents in attendance. It was an honor to cohost this event with the help of Manny Steil who shared his vision to help grow funding for the ILA. In addition to the Life Legacy Fund, we already have we hope to secure another endowment fund. I wish to thank Manny and other Past Presidents who have volunteered to help create a plan for this possibility.

Also, during the gathering it was my desire to inspire the group of past presidents, bridging a stronger connection between past, current and future ILA Presidents. To this end I shared following quote as used in the 1984 iconic movie “Footloose”:

“Ecclesiastes assures us... that there is a time for every purpose under heaven. A time to laugh... and a time to weep. A time to mourn... and there is a time to dance. And there was a time for this law, but not anymore. See, this is our time to dance. It is our way of celebrating life. It’s the way it was in the beginning. It is the way it has always been. It’s the way it should be now.”

Adding that “there is a time to Listen, this is ILA’s time, this is our time to Listen, this is how we got started.”

In the movie “Footloose” the character Ren (Kevin Bacon) gives a speech to the town council to defend the interests of high school students that wanted to have a prom dance. The council’s traditional views would not allow for it until Ren found a way to reach the members by learning about their beliefs, cultures, and norms. To help them see how it was not a threat to let the students dance. In the ILA we have struggled at times with this same generational challenge of competing interests in traditions, policies, and funding concerns. In cohosting the gathering with Manny, I found common ground to stand in awareness of our different experiences as the 1979 Past President and 2020 President.

The Past Presidents also shared their ideas in response to the following questions. This was the start of a beautiful conversation we hope to continue into 2021. More to come in the next Listening Post.
It is now time for me to wrap up my duties as our 2020-2021 ILA President. I have about six weeks remaining until I pass the gavel to Melissa Beall, incoming ILA President for 2021-2022 at the 2021 ILA Virtual Convention. It will be my honor to serve ILA next year as Immediate Past President.

In closing, I wish to acknowledge the loss and suffering of all in the world due to the effects of Covid19 pandemic. My heart goes out to you. May you and your families continue to be safe and healthy. I am here to listen because I care.
The very first, and hopefully, last required all-virtual ILA Convention, is six weeks away. We look forward to finding ways to creatively network with each other as we virtually meet together to learn from one another, share ideas, renew former ILA friendships, and gain new ILA friends.

The convention will begin on the regularly scheduled days of March 18, 19, and 20th. Those days will each provide five program sessions (for a total of 15 sessions), the 2020 and 2021 keynotes, business meeting, awards, ceremony, Presidential Address and Passing of the Gavel. We’ve scheduled some times for Virtual Breaks so you can ask for a few minutes to speak with a few friends in breakout rooms after the session is completed. All session slots are set for a 75-minute time frame. Any extra time left will allow you to connect with colleagues. Thus, even though we will not meet face-to-face, we will have an opportunity to spend a few minutes after sessions to visit, make arrangements to meet later, or to check in with others. (Specific times can be found on the ILA website under “Conventions” and will be updated to include a complete program of presenters, titles and abstracts in the next week, once scheduling is finished and participants are notified.)

There will be no more than two sessions each of the Saturdays in April, May, and June 5. If we don’t need all of them, we won’t use them. Updates will be posted on the ILA website and email blasts to the membership will provide you with information on the sessions, much as they have for the Meet-Ups and Exchanges this past year.

In order to provide virtual breaks, all sessions are set at 75-minutes, even though paper sessions are usually one hour. This allows us to have numerous virtual breaks throughout the course of convention presentations. The March days will start at 8 a.m. and finish by 6:00 p.m., with breaks in between. Once you pay the convention fee, you will receive a passcode and have access to all convention sessions. You may attend as many or as few as you like and move in and out of sessions easily. Each session will have a moderator who will mute attendees during the presentation. If you have a question for presenters, you can write it in the Chat section and the moderator will pass those along to the presenters. If presenters need breakouts, we’ll arrange for those, as we work with everyone. This system will also allow us to use any extra time for Virtual Breaks.

I am in the process of scheduling specific sessions and will notify everyone soon. We will work with all global presenters to find a mutually convenient time for presentations. For example, Krishna Naineni has a group of medical students in India who will likely present their panel at 7:30 a.m. Central Standard Time, Saturday, May 22, which is 7:00 p.m., India time. This way no one in the group has to stay up all night, present very late, or very early to get the presentation completed. If you have special time needs, please let me know and we’ll see how we can make that happen. If you’d like to volunteer to be a moderator (includes muting attendees during the presentation, keeping track of those who wish to ask questions or interact with the presenters, and time management for the session and virtual breaks), please contact me: Melissa.Beall@Listen.org.

Melissa L. Beall, 1st Vice-President (Melissa.Beall@Listen.org)
Listen for the Person: Not Just Identity

Dr. Michael Purdy, Emeritus Professor, Governors State U.

The current cultural climate has often fixated on a person’s identity. Focusing on identity affects our ability to listen, especially to listen with heart.

Most of the time identity is not concerned with listening with the heart but focuses on the “visual” details that identify a person and make judgments about a person. We don’t usually do it intentionally. Identity is about one’s features, all that we “see” or imagine we “see”: eye color, hair color, skin color, cultural origin, gender and so forth. These are the surface characteristics, the details of what may be identifying in our listening. Western culture is very much hung up on the visual: what we see as opposed to how we listen, or even how we feel. We listen, so often, through identity. We cannot help it, this visual bias is highlighted and emphasized by the media, it is part and parcel of our cultural milieu. I find myself attending to features of a person and have to check myself and shift my attention to listening (with heart) to the person. We, indeed, are better listeners when we listen with heart and tune into the fullness of the person.

We do need to “see” as we listen, but our listening should involve at least the senses of vision and hearing, and be a perception that also includes a deeper, more wholistic engagement with others. Here the ancient sense of a human being is not only heartfelt, but is feeling the sense of the other; listening to the other as a person. This sense of listening to a person comes from per-sona, literally “through sound.” Through sound, a resonance with--literally and metaphorically--we listen to a whole human being. The human being who in their wholeness is more than their culture, more than the features and characteristics we see. They are a whole person whose vibe can be heartfelt in our listening. We hear a person through the sound of their voice, the tone of their words, the character that permeates their spiritual being, and which we perceive--if we are open to being attuned with the heart. Heartfelt listening is listening to the complete person, attuning to all that they are and sensing what they are in their wholeness.

EAR LIDS: WHY and WHY NOT?

Michael Murphy

In the comparison/contrast of eyes and ears there is always one major difference identified early in the discussion. We can close our eyes, but we cannot close our ears. If evolu-
5. What can you do to enhance your listening?

Adjust the language and the prompts can be effective for any age/grade level, in any major/career or in any endeavor. They can be used as creative writing prompts. They have been used effectively in grades K-grad school, in corporate training, to earn CEUs, in various psychotherapies, in planning architecture, city spaces, restaurants, work spaces, and many other disciplines.

This basic idea definitively begins critical thinking and discussion about hearing and listening as well as how we can begin to manage our hearing-listening lives. Get the listening ball rolling. Use these questions and others of your own design to get folks thinking about the skill we call listening.

What does an interaction involving racism require of us?

Richard D. Halley Ph.D., CLP

First and foremost, an interaction involving racism requires an honest assessment of our personal belief structure and looking closely at our own position in interracial relationships. Do we believe we are somehow superior to this other? Are we willing to give this other genuine opportunities to prosper and improve their position in the community? Are we willing to invite this person to dinner in our home? The list of such questions may be endless. Secondly, we need to be aware the groups we belong to strongly influence our patterns of behavior and attitude towards others; and look at our beliefs that derive from these influences. If we can become conscious of our personal beliefs and feelings regarding our relationships to people of other ethnicities, own our beliefs and feelings, and commit to addressing their impact on any interaction with this other we might have, we might begin to be in a place where we have a chance to learn how this other feels about us.

Conversations don’t have to start at the heart of disagreements. If we can own our beliefs and feelings, perhaps we are ready to have a meaningful and useful interaction with persons of another ethnicity. The admonition at this point of course is that we should listen to these other people. I suspect that one hurdle we must get over in order to do this is to accept the responsibility to listen first. So many times, when someone says “if they would only listen,” they mean the other person should listen to their ideas. For many people the idea that there is something wrong with what they think and believe is not something they consider. Any more so than most of us are always conscious of how groups influence our thinking; for that reason, many have trouble with the concept of institutional or structural racism. Therefore, we frequently default to the comforting notion that if this other person would just listen to my beliefs, we would be able to fix what ever needs fixing between us.

So, when dealing with something as tough and socially engrafted as racism, it is imperative that we commit ourselves to listen first. That we commit ourselves to working very hard to understand the experiences, beliefs, and values of the other. In order to genuinely make such a commitment, I believe that we should make a genuine effort to learn what quality listening is like. We should make an effort to learn some of the skills of a good listener. There are many places to get help with such learning. There are many books available. A short list is provided at the end. There are many workshops, community courses in libraries, university courses (many of which can be audited by those not a student at the university). As you approach such listening, there are three overarching issues you must address. 1) You must develop compassion for those you intend to listen,
2) You must genuinely want to understand their point of view, and 3) you must be prepared for the strong possibility that some of what they say may be very uncomfortable. Please keep in mind that learning to listen well takes a lifetime. As you go through life, situations change, people change, and you change. These changes will inevitably add to the demands of what is needed to listen well. Just keep at it.

How do we make the opportunity to do such listening? There are, of course, many projects aimed at doing such listening. A search of the internet should give you a lot of options. For example, look at http://www.listenfirstproject.org and https://welcometothelistening.org/free-listening and https://www.seedsofpeace.org/seeds-of-peace-center-for-coexistence

However, I believe we should start in our own back yard. I live in a mixed-race neighborhood. I have had the good fortune to meet many of these people, primarily while out walking my dog. Dogs have an amazing ability to draw people in and have provided me with opportunities to have, usually short, but significant, conversations with most of these folks. Over the years I have spent time with the county manager, the manager of paper deliveries for the local paper, a volunteer for the local animal shelter, a retired army Sergeant who makes his living now as a professional fishing contestant, and several rather racist white gentlemen. I want to share a recent success. It is not exactly racial, but similar to other interactions and rather intense. My neighbor is a generally friendly man, and he is a big fan of Donald Trump, the current president of the United States. Since I bring this up you can guess that I am not a fan of Mr. Trump and I find it hard to see Trump flags in my neighbor’s front yard. My approach has been to welcome him to our neighborhood and offer help if he needs it. His response over the years has been to offer help in return. However, we know that we disagree about Mr. Trump. For some time, we had only limited interactions. We have made small gestures over the years of helpfulness and followed through on some of the gestures, but interactions have been brief. It has finally born fruit. Recently I asked if we could chat a bit. We sat down on his back porch and talked about our lives and our political views. It was very interesting. I learned a lot about his health and his children. I learned some limited things about why he likes Trump. We walked away saying we will do it again and assuring each other that we will probably not change any minds, but we will work to understand each other.

In my experience, this is a way of starting conversations that has worked several times for me in the racial context. Remember, conversations do not have to start at the heart of disagreements. They can start with something as simple as a compliment, perhaps reinforced over a period of time. So, you could like a pin or tie someone is wearing. You could like the look of their garden or flowers. You could express appreciation for their contribution to the look of the neighborhood. The crucial variable here is that you express something that you genuinely appreciate or like. Hopefully, as in the case with my neighbors, you will eventually get the opportunity to extend the conversation and learn some of what is important to this person.

We are looking for time to spend together that is positive and has the potential to build positiveness in the relationship. Sometimes if one can spend enough time in such positiveness, the opportunity arises for them to talk about a topic of personal concern. If this happens, you now have the opportunity to listen to their point of view.

Now is your chance to reflect your understanding of their point view from their point of view. Hopefully at some point, you will be able to ask clarifying questions. Questions that give them the opportunity to explore more specifically the basis of their point of view. Hopefully they will get to an event in their life that helps you understand why they have made the choice to believe what they believe. This can sometimes lead to more conversation that helps them believe that you really understand their experience. The result is sometimes a positive change in the relationship. Given enough time an opportunity to tell your story may arise. Should this occur sometimes you can share in a way that alters their perception of your world. Note that this is a process, it takes a long time and most likely must happen one on one. Therefore, in order to make a major impact on society such interactions must occur in many independent events.

Perhaps it is really many attempts with different people that one day becomes a longer conversation. You may wish to share what you are trying to do with close friends. The important point is to start, to make your attempt and begin. That attempt will have a positive influence on the behavior of others in your various social groups.

Books and other resources that may help you become a better listener:

International Day of Listening 2021

Listen to Connect

Sheila Bentley

2020 was a year of disconnects—most of us were disconnected from many of our family members, friends, and even work co-horts. We were disconnected from our usual routines, and the problems we dealt with changed from day to day. It was a year unlike any most of us had ever experienced, but it did help us to realize how important having connections with others is.

With that as the backdrop for 2021, the theme for this year’s International Day of Listening is Listen to Connect. The date is Thursday, September 16, 2021, and the IDL Committee has been busy planning sessions and events to help everyone prepare for the IDL and to help us regain those all-important connections that we have had with people.

This year, there will be two strands of courses and events: one for the general population and one specifically designed with healthcare workers in mind. Both strands will focus on helping people make strong connections through listening.

On the 16th of each month from February through August, there will be either a Mini-course session to attend or a series of listening experiences that we are calling Listening Moments.

The healthcare strand will provide educational sessions through the ILA Healthcare team (check the ILA Calendar) and will also reach out to the healthcare organizations and do sessions based on the Listen to Connect theme. In addition, the IDL team will be supporting medical students in India with peer education programs which are listening based.

Check the International Day of Listening website (internationaldayoflistening.com) for updates and for further information.

Everyone Needs Someone To Tell It To:

Michael’s Story

She wanted to know about grief.

Did I feel grief about my son?

About his limitations? About the things he wouldn’t do, who he would never be? About the limitations his care places on Kathy and me and his brothers?

It was late into our 90-minute conversation when she asked me about grief. There was something I had said earlier that made her want to probe more about the grief I might feel over who our son Matthew is and—maybe more significantly—isn’t.

Of all the questions she asked about his severe intellectual disabilities and autism—every single one thoughtful, insightful, compassionate—this one stopped me in my tracks, metaphorically. No one had ever really probed me about grief in relation to him before.

I welcomed the invitation to explore it.

Corine has been becoming a dearer and dearer friend to Tom and me. We met her in person two summers ago when we made a presentation for the International Listening Association in Dublin, Ireland. Previous to that, we had had a Zoom conversation with her about her work as a Chief
Listening Officer in a hospital system in the Netherlands. We saw her once more, last year in Vancouver, British Columbia, Canada, when we presented again to the members of the ILA. We instantly liked her during the initial Zoom conversation, and found a synergy with her over our work and our common passion for hearing the stories and experiences of others, especially those living with physical, emotional, and spiritual uncertainty.

Did I feel grief about my son?

“Yes, I have,” I answered without hesitation. And I continued to.

The feeling comes unexpectedly when it does. Often, it’s when Kathy and I are doing something that we can only do without Matthew—or at least without major planning and logistical organization—such as shopping together, on the extremely rare occasions we could actually go to a movie, or attend a concert, or stay overnight anywhere. It’s a feeling of loss for things he’s never had, the things he’s never been able to do and never will.

It comes, and brings sadness. When we do something fun with our young grandchildren or other sons that we can’t easily do with Matthew. A lingering melancholy. The fact that we are enjoying something that he can’t easily be part of makes me feel sad for him and for us for what we can never share with him. We hate to leave him out of any important parts of our family’s life. We try our very best to make every accommodation to include him. But at times, it’s just not easy.

I remember the day he graduated from high school. He was 21, the maximum age by law in which he could have still attended school. Hershey (Pennsylvania) High School gave us the option to have him graduate on the big stage with all the other graduates—several hundred of them, very few of whom he ever interacted with—or to have a small, private ceremony arranged by the special education department of the school where he was nurtured and loved by some very special teachers and aids.

Kathy and I had a serious dialogue with one another. Was it important to have several thousand people see him on the stage, to show his inclusion, which meant a lot to us, even though he would hate sitting there for several hours, and would need someone constantly by his side to keep him occupied, quiet, and undisturbing? Would he even understand or tolerate any of the proceedings?

Or would it be best to hold a more intimate ceremony, attended by the students, teachers, and aids with whom he was with in school every day? One where he’d be the center of attention and much happier and more likely to enjoy with the people who really knew him?

We decided to forego the “statement” a more public graduation experience might provide for one in which Matthew was the focus. One that would have elements he could appreciate.

They provided him with a traditional cap and gown; he refused to wear the cap, as he refuses every head covering, we have ever tried to put on him. All the special education students and staff in the school assembled in a large room to witness his big moment. A string ensemble from the school orchestra played Pomp and Circumstance as he was wheeled into the room. The school principal and superintendent were there to witness the ceremony and say a few words. A big cake, punch to drink, and other refreshments were laid out. He received gifts that he loved: New bathing suits (they knew he wore them every single day of every single year), t-shirts, and gift cards among them. We and his brothers were there; his oldest brother Adam flew home from Germany where he was working at the time, to attend. So were his grandparents and great-grandmother. The ceremony was touching and intimate, fully appropriate for him and enjoyed by him. He may not have known why this was happening, but he knew that he was the center of attention. He loved it! We all went out to lunch afterwards. It was a beautiful and extremely special day.

And it was sad, too.

We knew this was probably the last big highlight of his life. I felt wistful recognizing that. There would be no more graduations, no new jobs to celebrate, no wedding or big trips, or awards, or accomplishments, or children. None of the things his brothers would have. None of the achievements. None of the milestones ahead that parents might want for their children. For him, they are not going to happen.

Grief at who he might have been, but can never be. We’ll never hear him say even one word. He’ll never be able to dress himself. He can never be left alone. He’ll never have independence. He’ll never fall in love. His world will always be very small. His impact? By the world’s measure and standards, there’s little promise it will be big or lasting.

During our conversation, I’d told Corine about an overwhelming feeling I felt the weekend before. It’s what prompted her to want to talk about grief.

We had met our son, David, his wife, Janelle, and our grandchildren, Emma and Elle, at Hershey Park, one of Matthew’s favorite places on earth to visit. In the summers he loves to ride several of the roller coasters and shriek with delight as he’s jostled around. He thrills to the speed and the laughter and screams of others. We can hear the roller coasters from our yard all summer long. We love the sound! Riding them is one of the very few, but special, things he and I do together each summer. We have season passes. Except, we couldn’t go this past summer because he wasn’t able to wear the required COVID-preventative mask.

He couldn’t go last weekend, either, when it was open for the holiday season with tens of thousands of lights, hot chocolate, holiday music, and some of the roller coasters
running—again, because he can’t wear a mask. He also
hates the cold and just wouldn’t have enjoyed how cold
it was that afternoon. In order to see our son David and
his family safely, we decided to meet them there because
everything is outside. One of Matthew’s caregivers stayed
with him while we went.

But I felt sad that we were at one of his very favorite places
and he wasn’t. We had a good time; it was a lot of fun. But
I felt an overpowering shroud of grief at what he couldn’t
be part of. He would have loved seeing his brother and
sister-in-law and the kids. He would have shrieked for the
only time all year, riding a roller coaster. And it wasn’t just
these simple things which caused my melancholy, either—
it was that they represented all the things he just isn’t able
to do with us or anyone.

I can’t tell you how much Corine’s thoughtful and sensi-
tive questions meant to me. She helped me to uncover and
understand those feelings, and why I was feeling them.
And I told her so. I needed someone to tell it to, the day we
talked. And I am so grateful that she wanted to listen. Even
us listeners need someone to tell it to some days.

I don’t want you to think that I’m sad a lot or live with
strong feelings of grief all the time. Because I don’t.
There’s so much joy, so much laughter, so much love with
Matthew, even when life with him is hard.

But every once in a while, there comes a gushing rain
that washes over me and drenches me with sadness, and
longing, and grief. At what is and what is not. At what will
never be. At what we’ll never know. Holidays, interesting-
ly, as much as I absolutely love and look forward to them—
especially these end-of-the-year holidays—can often bring
a sadness that comes and goes. Yet sometimes it lingers a
little longer than I would like. Perhaps this year, it’s linger-
ing because this whole year has been filled with loss and
sadness and grief in all kinds of ways for just about all of
us. For different reasons, maybe, but the losses and long-
ings are very real, no matter what they are.

I also want you to know this: remember the impact I some-
times worry that Matthew won’t ever have? As I’ve written
and talked about many times before, he has taught me some
things no one else can. His very unique life has shown me,
given me, several unending, infinite, and major life gifts. I
am exceedingly grateful for them all.

Unconditional love. Compassion. Patience. Grace. Em-
pathy, especially for others who live with disabilities and
for those who are routinely discriminated against. Whose
everyday lives are harder. Whose seeming brokenness is
not really brokenness at all.

It’s simply human.

And I am reminded over and over again, that all humans
are worthy of our love. Of being honored, of sharing in a
common humanity, of being seen as beautiful, of deserving
tenderness and empathy.

And dignity.

Corine listened, and gave my grief the dignity it needed.

Michael and Tom

Michael Gingerich and Tom Kaden are the founders of
Someone To Tell It To. They are dedicated to cultivating re-
lationships through compassionate listening and intentional,
deep connections.

Healthcare Group: We are ready for the
year 2021!

Corine Jansen

Please meet Tamsin Hartley from England, Glocal
Academy co-founder Dr. Krishna Naineni from En-
land, Annie Rappeport from the United States, and
Corine Jansen from the Netherlands.

We are thrilled to share knowledge and experiences
about listening in healthcare. If you would like to
join, or do you have a question? Please feel welcome
and reach out to us with questions and watch the an-
nouncements regarding listening education sessions!

The first was held on February 5 by Krishna Naine-
ni: ‘Listening Thieves in Clinical Practice: Aware-
ness, Appraisal of and Strategies to manage listening
thieves.’
Our partner Universidad Francisco de Vitoria started a new Project in Healthcare and well-being: Human 360°.

The purpose of Human 360° is to articulate an innovative and collaborative ecosystem that, from an interdisciplinary approach, around the health and integral well-being of people, seeks to contribute to creating a more humane and prosperous society.

Human 360° is a model that orchestrates and concentrates interests, visions, and resources to generate innovation around the subject of health and well-being.

Human 360° is an ecosystem that generates collective and innovative solutions to the challenges of “Integral Health and Well-being”, incorporating key agents, fostering collaboration between them, and putting people at the center.

Human 360° positions its promoters and members as benchmarks in comprehensive health and wellness and innovation.

As an annual speaker of the Active Listening (Learn-ability) Center of the Francisco de Vitoria University, working in healthcare, I advise them and connect them with possible innovations.

So if you want to know more? Please contact me: corine@corinejansen.com
Everyone Needs Someone To Tell It To: Tom’s Story
by Michael Gingerich and Tom Kaden

I donated blood the other day. It’s something I try to do every six weeks or so. The need for blood continues to be so great and it is one small, tangible way I can give back to others — when so much of our mission is intangible in nature.

Two different technicians facilitated the process, and while giving the blood was run-of-the-mill, the surprise I felt when both of the women shared something very personal with me was anything but. There was no intentional prompting on my part. I don’t know either of these women or anything about them. We had just met, and nothing I said would have inspired them to say what they said. I was wearing a mask, and so they really couldn’t read my facial expressions. I didn’t ask any open-ended questions (which something we teach about through Someone To Tell It To’s training program). I don’t know if there was something through my eyes that conveyed safety, but somehow, for some reason, both, independent of the other, needed to unload some rather weighty feelings with me. Like little droplets of blood given on behalf of someone else for new life, they were finding new life with each droplet of their lives expressed to someone else.

When the first technician tested my blood for my iron level, she off-handedly made a snide comment about her ex-husband. She then apologized to me and went on to say that he had been abusive and ultimately, she had to leave the relationship. I listened without comment. She indicated that she was a proponent of mask-wearing during the pandemic, but some of her colleagues weren’t. There was woundedness behind what she said about her ex-husband. There was irritation underlying her comments about her co-workers.

The second technician, who actually was drawing the blood, saw the tattoo on my right forearm that quotes Fred Rogers, in his own handwriting, that reads, “I’m proud of you,” something he said a lot to those he knew. Both Michael and I have a tattoo of those words, a symbol of the covenant we made when we created Someone To Tell It To. It’s a phrase we say often to one another and to those who reach out to us when they need someone to listen to their stories — usually painful and intense, on occasion joyful and celebratory — of their lives.

When she asked what the tattoo meant, I explained to her that we all need to hear those words, the message that others are proud of us, throughout our lives. She then told me that she was also divorced and that she was trying to repair the relationship between her and her ex-husband. Differing from her colleague whom I saw first, she told me, without any prompting, that she’s not too certain about the vaccine. She said she has several pre-existing conditions that could create a problem for her if she is exposed to COVID. She wasn’t certain what was best.

They both obviously had concerns on their minds that they needed to talk about that day. For whatever reason, I was someone they chose to tell it to, and I was reminded once again, as I am on a daily basis, that we all need someone to tell it to.

The next day, we held a virtual holiday gathering with our Someone To Tell It To team. There were three questions we asked the team to talk about during our time together. Everyone offered their reflections and thoughts; the conversation was deep and personal:

What’s been one of the greatest lessons you’ve learned in 2020?
What’s been one of the biggest challenges to overcome in 2020?
What’s been one of the most meaningful aspects of being involved with Someone To Tell It To in 2020?

The team learned about flexibility, letting go of a lot of expectations, and that Someone To Tell It To is needed now more than ever. We were challenged by letting go, by the unpredictability and modification in our daily lives, by the politicization of COVID and those who wouldn’t take precautions seriously. What was most meaningful was the teamwork and camaraderie, the incredible and inspiring people we met and interacted with, and the fact that we could pivot in a time of crisis to still meet the needs of those we serve well.

We talked about the concept of joy — the feeling of contentment, well-being, and peace that fills and guides us no matter what is happening around us. The feeling that we’ll be okay regardless of our circumstances and the uncontrollable things that come at us in life.

It was a solemn time of growing to know more about each other and celebrating our joint commitment to our common mission. All of us want to be heard and known for what inspires us, moves us, disturbs us, propels us, and gives our lives meaning and purpose.

About two months ago I was at the grocery store. Standing
in the same line to check out, there were two men: one older, wearing a mask, the other younger, maskless. The older man brusquely accosted the younger man about the absence of a mask. The younger man responded, also brusquely, and added some colorful profanity, calling into question the older man’s masculinity. The profanity was intensified as each man reacted to the other’s growing anger in the exchange. Those of us around them stood aghast, glancing at one another in disbelief at what we were witnessing. The confrontation only lasted a few minutes, but it seemed as if it were many, many more. I weighed in my mind what to do. Should I step in? Could I help to de-escalate the awkward, potentially violent situation? Would I get hurt in the process? Or merely escalate the tension? Thankfully, the verbal volley of name-calling ended without a punch being landed or a gun being pulled. The men walked away from one another, and the rest of us breathed in relief.

It was obvious to me that there had been a pent-up tension inside both those men about the reactions that others have had to COVID.

I wonder: What if those men could have healthier outlets to talk about their reactions to others’ COVID responses, or any other issue that eats away at them?

One of the vital roles we see Someone To Tell It To playing in peoples’ lives is as a preventative measure to blow off steam, to vent, to talk things out in calmer, less emotionally-charged and more productive ways. It’s to provide an outlet that we believe works to de-escalate tensions, resentments, and injustices.

In the week ahead, in our nation and many others, traditional holiday celebrations will be very different for most people, as the world is still facing great uncertainties and disruptions. We know tensions, resentments, and injustices are running high. This isn’t the holiday season we imagined or wanted. But it’s the one we have, and we need to find healthy ways to enter into the changes and limitations of the realities in front of us.

Having safe people to tell whatever it is that we feel about this very different season, this very disrupted year, and this very uncertain new year ahead is essential. People who won’t call us derogatory names, put us down, or dismiss us for our feelings.

We all need someone to tell it to every day, and especially now. We hope you can have at least one someone in your life to help process all that you’re feeling. And we also want you to know that Someone To Tell It To is here if one of those other someone’s isn’t part of your life. We won’t stop passionately pursuing our mission until each of us has one.

After all, as author Miles Franklin has written:

“Someone to tell it to is one of the fundamental needs of human beings.”
different culture, understanding the unsaid rationale paved way for a ‘bildungsroman’ in my life. Strong ties of mutual listening and mutual silence took this program to a different level.

This article would remain incomplete without due acknowledgement to the intellectuals who perceived this classic and exotic (if I may say) type of new and unique entity.

The Student Corner

First, Listen to understand, not to respond

- Dr Aditi Sharma Intern
  ITS Dental College, India

“This tip beautifully explains us to calmly listen and understand the other person’s point of view. As a doctor, I believe that it is our responsibility to attentively listen and not just hear to our patient’s concerns. Listening with an intent to understand helps us to build a rapport with our patients and gives them a sense of comfort. In addition, it helps the doctor clearly analyse the patient’s problems by ask them the right questions; thereby reaching a correct diagnosis.

I will share an example from my experience where this tip helped me to understand the problem better and establish a correct diagnosis. This happened in my final year when I was in Oral Medicine and Radiology posting. A middle-aged woman presented with persistent white pigmentation on the tongue. She told me that the previous Doctor diagnosed the condition as fungal infection and prescribed ‘oral mouth paint.’ As per the instructions, the woman used it regularly for 3 weeks. As the condition did not improve despite adhering to the management plan, the patient came in for further review. On questioning, the patient told me that she was not able to have spicy food, as it would irritate the pigmented area. She mentioned that the other doctor did not listen to her and prescribed the medicine just by having a glance at it. I listened to her narrative with care and asked questions to understand. By doing so, the diagnosis of Oral Lichen planus came to me. It was magical. I called my professor and told her the whole case. My professor was glad that I was able to diagnose the case and it was all because, I listened to my patient carefully. She was happy that finally someone paid attention to her and was able to diagnose the condition.

Few days later, she came for follow up and informed that she was able to enjoy her food, as condition was getting better.

Listen with an open mind to the speaker:

An open mind is the listener’s workshop

- Dr Apeksha Kakkar
  MBBS, ECFMG Certified

Often impatience due to time constraints and/or heavy workload leads doctors to interrupt the patient prematurely or have the diagnosis ready in mind (anchoring bias) even before the patient can complete their history. For composite patient care, a clinician should have a thorough understanding of the subject as well as the ability to interact with patients in a manner that encourages them to share their troubles without hesitation. To facilitate this process, the doctor needs to first get rid of any preconceived notions and treat each patient encounter as a fresh one. While clinical experience aids in the application of clinical knowledge, attention to detail helps us in achieving mastery over the craft of medicine.

As a result of ineffective listening, the patient will be dissatisfied with the treatment and the original complaint will remain unresolved. Healing emphasizes on relieving the patient of their discomfort. For this, we need to listen to the patient’s story without any bias. In high school, I came down with high fever and my pediatrician was out of town. Thus, I had to visit a new doctor and while his credentials and experience were top-notch, he neither let me complete what I was saying about the associated symptoms nor did he bother to elaborate about his initial impressions. I was so put-off by the rude behavior that I instantly knew I will not follow-up with him. I also refused to take any treatment he prescribed, except the Paracetamol (Tylenol) that my mother had already started.
“Let the speaker finish talking before you respond”

- Dr Roshni Kharbanda
  Intern, ITS Dental College, India

“Today, I will expand on—“Let the speaker finish talking before you respond.”

In order to respond to what the speaker is saying, we should be aware of what the other person is speaking. By being present, we can stop our urge to speak and interrupt.

If we are continuously thinking about what we should be saying next, we miss what the speaker is saying. We shift our focus from their talk to our thoughts of what next to say.

Example- When a patient is telling about their smoking or drinking habits, I used to frame the responses (I must tell the patient to stop smoking or cut down alcohol) in my mind. Now instead of advising them, I am asking more questions to find out the story behind their habits. When did you start smoking? Why do you smoke? Are you ready to quit smoking? etc.

I am practicing this listening tip by following a simple strategy- “biting my tongue gently.” I have learnt about this strategy in one of the educational workshops organized by the academy. I am consciously making an effort to practice. So far, it has been impactful. I am confident that with continued practice I will change my habit of interrupting the patient.”

Prepare to listen. Get rid of internal and external distractions

- Uma Gupta
  Final Year Medical Student, India

Given the severe time constraints, huge workload and staff shortages we are in a rush to make the most out of our time and tend to divert our attention on to multiple things. In addition, the emotional hijackings hinder our ability to pay attention which in turn leads to ineffective listening. These, external and internal distractions, may lead to an incomplete information gathering and incorrect diagnosis and may often cause the patient to refrain from opening up to us.

I wrote a poem to highlight the distractions and the challenges they pose on listening.

Blinking lights, beeping phones and agile minds,
Distracts come in different shapes and kinds.
Pause, breathe and see,
You will experience your patient’s energy.
Understand them with full attention,
As there is stagnation in distraction.
To sum up, we need to identify routine life obstacles to active listening, to ensure that we render better services and continuously enhance our skills, as the practice of medicine is infinite- a journey, not a destination.

Reflect back what you’ve heard if that seems appropriate

- K Vidhya
  Medical Student, India

“Reflecting back requires both attention and intention, and that you keep in mind how your own opinions and worldview shape up your interpretation of what was said. Reflecting back or checkout method—builds trust and defuses any conflicts between people before they even begin. In everyday conversations, it is generally not instinctive or natural to be a reflective listener. We tend to have an inclination to talk about ourselves, advise others, tell stories, or agree or disagree with the speaker.

For Example—Speaker: “I know I should start my weekly assignments earlier, but I’m always busy with other things. Then I wait until the last minute, and the product isn’t very good.”

Listener: “You have a busy schedule, and you’re having trouble making this class a priority.

Speaker: Exactly!

Here, the speaker clearly feels heard and understood
by the listener even though he has not given any solution to the speaker’s problem. People always are not seeking solutions or answers... Many-a-times they just want to feel heard and understood. The next time you are having a serious conversation with someone take a moment to set the intention that you are going to listen mindfully and reflect what you hear. You might even take a moment to pause and tell yourself that you are going to listen rather than jumping in. When the other person has finished speaking, take a moment to pick out the feelings you hear them mention. Feel free to share your insights regarding ‘Reflective listening’ or any examples, which you would like to share-- in the comments below.”

Listen for strong emotional content of the message, as well as the meaning of the words

- Rajvee Rao
Medical Student, India

“It is crucial to make the patient feel heard by ensuring that you understood them correctly. The clinician can do this by confirming for both facts and feelings. Practicing this would clarify any air of doubt or misunderstanding that might arise as it makes sure that there isn’t any illusion of understanding. It would also help the clinician be attentive throughout the conversation and effectively deal with the issues and needs the patient has raised. Confirming can be done by paraphrasing or summarizing what the patient has said and then asking if you have heard/understood it correctly. Merely asking, “Am I right?” goes a long way as it doesn’t make the patient feel judged. Confirming for facts is found to be simpler than confirming for feelings.

Nevertheless, confirming feelings has a more profound impact on the patient. It would make them feel cared for and supported. It has to involve listening accurately to their words as well as their body language and then naming the emotional state of the patient. Practicing this helps to bring the vaguely expressed or strongly implied feelings into clearer awareness. Emotions are often more central than the content in the patient’s communication. The clinician can confirm for feelings by saying, “you are feeling....” Or “you sound....” Or “you look....”. This can help the patient get in touch with their feeling and represent their experience accurately. Some feelings that are more subtle than the other can be identified by observing the patient’s energy, facial expression, and the tone, rate and volume of their speech.”

“Look for verbal and nonverbal clues about how important this message is to the speaker”

- Madhava Sai Sivapuram
Medical Student, India

“Often in the crowded OPD, we often fail to notice the subtle clues that the patients show. For example, if we ask a female patient with an UTI infection for how long she had dribbling of urine? Her answer would usually be in a dull and a nervous note because the question that was asked was private. Also, she may feel uncomfortable to share in the busy clinic settings surrounded by healthcare people and sometimes family members. The dull or nervous tone is a verbal clue that needs to be acknowledge by the clinician. Once acknowledged the clinician should take necessary actions, like closing the clinic room doors or requesting the family members (if present) to stay out. These actions might make the patient feel comfortable and they might feel confident in answering private questions. These actions will also strengthen the trust in clinician.

In addition, it also observed that the patients display several non-verbal cues (facial expressions and body language) when narrative their problems. The clinicians should sense, process and respond to the non-verbal cues appropriately.

Here are some of the tips for understanding the verbal and non-verbal clues:

1. Listen to the tone of the patient.
2. Listen to the body language of the patient.
3. Listen to the facial expressions of the patient.
4. Listen to the meaning behind the words.”
Respond in a way that shows that you have listened and follow up with future actions to show that you listened

- Adrita Sirkar
  Final Year Medical Student, India

“There is prayer in the heart and on the lips of the patient as one enters a doctor’s clinic. They pray for the alleviation of their suffering; be it physical or emotional. The patient is highly vulnerable as they are unable to understand what is wrong with their body and how long it will take for them to feel better. Patients have immense faith in their doctors and wish that they listen intently and diligently to them with all their attention directed at the verbal and non-verbal cues. Showing concern and reassuring the patient puts their mind and body at ease.

During my clinical posting in the orthopaedic department, I vividly remember having a conversation with a woman immediately after her consultation with the surgeon. She came in for a follow up session following her knee surgery. Although her leg was recovering well, she was experiencing tingling pain in her knee. I expected her to be unhappy, however she sounded extremely happy and content with the surgeon. What she said amazed me. She said that the surgeon was very attentive and took time to explain why she was experiencing the pain. In essence, the surgeon listened. The way in which he responded, patiently and clearly explaining the problem without rushing, made her feel satisfied and confident.

Responding to a patient’s needs requires focused attention and patience. Our patient should be able to tell us their problems with as much ease as they would have told their parents without any inhibitions. Moreover, for them to open up that way, we need to be good listeners. With practice and persistent efforts, we all can master the art of listening patiently.”

Being present
(Patient’s Perspective)

- Khushi Agroya
  Medical Student, India

Be there for me my dear doctor,
Be there not just in form but in mind,

Be there because I’m coming with a hope,
A hope to be listened,
Don’t just listen,
Listen with care,
Be there for me my dear Doctor.

Be there with a welcoming attitude,
As I creep in shyness.
Be there with an intention to understand my problem,
As I’m worried.
Be there and try to make me feel comfortable
As I have lot to share.
Be there to explain to me what’s wrong so I can understand,
Be there for me my dear Doctor.

King Vikrama— The Master Listener
A narrative based listening education workshop

Taranjot Kaur
Final Year Medical Student, India

The stories of Vikrama and Betaal are few of the many memories which are etched on the canvas of my childhood. As a kid, I have always enjoyed the stories and riddles from that show. When I started watching again I have come to realise that the stories have more to offer than with the fun and excitement of solving those puzzles.

Decoding all the hidden meanings was a herculean task but patience and persistence Dr Krishna Naineni and I were able to unravel the listening secrets. With an intended aim of sharing the listening secrets with fellow medical students we designed a narrative based listening education workshop.

The workshop had its pilot run in December 2020.

I was sceptical that people shall not join or perhaps, they’d get bored. However, the turnover was beyond my expectation and everyone enjoyed my work and appreciated it. I felt so happy and content. There was a lot
of positive feedback which motivated me to do another successful workshop along with my dear friend, Ishaan Wazir, in January 2021. We have plans to run regular sessions throughout the year.

I can’t help but notice how much I got to learn from this fascinating workshop. Some of the responses that people gave, in the breakout rooms, haven’t occurred to me while I was trying to decode the meanings. All of this helped me realise the importance and power of effective listening.

In the end, all I can say is that, “Listening is not something that is inherited. Listening is something that is acquired by learning and practicing.”

My motto: “Keep practicing listening daily.”

**Active Empathic Listening Workshop Experience**

- Gunjan Singhal & Anisha Agarwal

Anisha Agarwal and I have joined the International Listening Association (ILA) recently. We are part of ILA Student working team and are currently working on a pilot project (Active Empathic Listening) led by Dr. Krishna Naineni and Peter Forbes. The intention of the innovative listening research and education project is to enhance listening knowledge of healthcare providers. It is an innovative peer-learning project that is designed and delivered by the students for the students.

So far, we have conducted six sessions, every session was a magical experience for us, and the participants (based on comments in the feedback).

We are hoping to share our exciting learning journey and results of our pilot project at the virtual ILA Convention.

**Are You Even Listening?**

- Ishaan Wazir & Taranjot Kaur

I’m sitting here
In my chair
Right beside you

My mind is clear
I begin to share
All my thoughts with you

Are you even listening?
Are you there?
Are you aware?
Of what I said to you

How is this fair
That I’m so near
And yet so far from you?

Laid my heart bare
To you mon cher
But you don’t have a clue

I hope this prayer
From this despair
Would someday, get us through!
Poetry Corner

Love Is
by Nikki Giovanni

Some people forget that love is
tucking you in and kissing you
“Good night”
no matter how young or old you are

Some people don’t remember that
love is
listening and laughing and asking
questions
no matter what your age

Few recognize that love is
commitment, responsibility
no fun at all
unless

Love is
You and me

Love Listen -A new poem
by Ann Gray-- from The Guardian
Let’s love, listen, take time

when time is all we have.

Let’s be unafraid to be kind,

learn to disregard the bad

if the good outweighs it daily.

Let’s make a gift of silence,

the day’s hushing into dark,

and when we hold each other

let’s always be astonished

we are where we want to be.

Let’s hope to age together,
but if we can’t, let’s promise now
to remember how we shone

when we were at our best,

when we were most ourselves.
From the IJL Editor’s Desk

Dr. Margarete Imhof; Johannes Gutenberg University, Mainz, Germany

The new volume of the International Journal of Listening has started with an issue with a focus on listening in language learning. There is a growing interest in listening among the community of researchers on second language learning (L2). They investigate the test-taker’s cognitive processes during a listening test (Wang & Yu, 2021) and they critically evaluate standardized tests of listening in educational settings (Aryadoust, 2021; Chou, 2021). These papers showcase how both teachers and researchers in the area of L2 work on a better understanding of what exactly listeners do and how the pertaining mental activities can be developed.

ILA members can access cutting edge research in the field as free access is available to both the published issues and the latest papers which have not yet been assigned to a specific issue.

As an aside, I would like to mention three observations:

First, I found that historically, L2 researchers drew on the listening research to get a grip on listening in a second language; now it seems that the impact goes the other way, since we now see studies which look at how research on L2 listening can inform teaching and practicing listening in a first language (Janusik & Varner, 2020).

Second, I want to encourage authors and researchers to submit their papers to the International Journal of Listening and to share their research on all aspects of listening. Experimental research and empirical studies on multiple facets of listening are welcome to add to what has been published on listening with empathy (Gearhart & Maben, 2019; Meldrum & Apple, 2019; Strom, 2020), listening in social media (Vickery & Vetrano, 2020), and listening across generations (Parks, 2020). Submissions are handled online through https://mc.manuscriptcentral.com/ijl.

Third, to ensure the quality standards of the journal, an editor is always searching for scholars who give their time and expertise to review submitted papers. If you are interested to serve as a reviewer, please let me know at ijleditor@listen.org.

In case you are now curious on what it is all about: Go to www.listen.org, log in as a member and follow the members only link to the International Journal of Listening. There you will find all the papers referenced in this piece.

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