

Good essay about communicating with adolescent patients

[Sociology](#), [Communication](#)



Question 1: Communication challenges and how they affect consultation

- During childhood and pre-teens, patient Anna (15 years old) used to be very friendly and maintained good communication during consultation.

However, she has now changed, and she does not maintain a direct eye contact.

- **Anna is now adolescent, and she may be undergoing adolescence changes that have also affected her communication skills.**

- Both girls and boys undergo physical, mental, sexual, and social changes that affect their general well being.

- Being a transition period from childhood to adulthood, adolescents adapt different behaviors and roles depending on parenting style and environment.

- Adolescents often disagree with their parents and this may even affect the ability to fully express oneself during consultation.

- These adolescent changes also affect communication and relationship between both the parent and the physician. Some adolescents may fear talking to a physician, probably because they fear the parent being informed of the nature of the illness. Thus, may withhold some information.

- Cooperation between the doctor and adolescent is also affected since the adolescent may feel shy to openly share personal details with the consulting health care professional.

- Parenting style affects the nature of communication adopted by the adolescent. For example, adolescents brought up by authoritative parents

often harbor internal anger, become anxious, and may develop depression with suicidal tendencies.

- On the other hand, adolescents brought up by permissive and less authoritative parents tend to be delinquent, and may easily engage in drug abuse. However, the doctor should always remain non-judgmental to any risky behavior.
- Sometimes the patient may express distress and anxiety. The doctor should always maintain confidence and express empathy. Furthermore, the physician should avail ample time for building rapport with the adolescent.

Question 2: Possible issues, challenges, and approach in consultation

- Adolescents have special health related problems including depression and substance abuse. These problems among others manifest in one's behavior, communication, and presentation.
- Being unshaven indicates self care deficit, which could be contributed by low self esteem and lack of situation control. Whereas having a sad face may suggest weakness, lack of energy and hence a depressive mood.
- The consultation process may necessitate patience and communication with the adolescent patient. The doctor should also assure the adolescent of privacy and confidentiality, but this may be compromised in special circumstances, for example, if there is impending self harm (suicidal tendencies).
- The doctor should aim at involving both the patient and family in the communication process during consultation unless the patient requests privacy. Establishing a supportive environment relieves anxiety and

enhances trust.

- Therefore, the health care professional should keenly and critically assess the patient's autonomy, behavior, and possibly, the parenting style.

- During consultation, the physician should also review the patient's living conditions, social and economic activities, use of drugs and substances, mental status (depression, suicidal thoughts), and education activities among others.

- The doctor should also observe the patient during a physical examination to identify any other issue (s) affecting the adolescent. Adopting a multidisciplinary approach as nursing, social, psychiatric, and spiritual services is a prudent approach during the consultation.

- According to Wilkes and Anderson (2000), psychosocial screening and establishing an open communication during the consultation are significant in obtaining an impression of what the adolescent is going through. Explore the patient's status and address any fears and emotional concerns by providing facts.

- Sharp listening skills, are needed to extract adequate information from the adolescent. Furthermore, the doctor should be ready to share personal experience when asked by the patient. This not only promotes trust but also confidence in information sharing.

- Psychological counseling is also important in preventing or averting impending depression, substance abuse, and sexuality concerns.

Question 3: Factors that contribute to difficulties in consultation/communication among adolescent patients

Adolescence is a critical cohort with significant health problems including, acute and chronic illnesses, accidents, drug and substance abuse, sexuality and reproductive health problems, and mental health issues among others. Thus, adolescents may feel out of place, confused, disoriented, or isolated. For this reason, maintaining effective communication with adolescents may be difficult. The consulting health care provider need to instill confidence in the adolescent demonstrate empathy and be supportive.

Adolescents are highly influenced by peer related actions and decisions. Furthermore, self-esteem and independence are issues adolescents grapple with. These factors end up affecting the communication skills of an adolescent in many settings including consultation. According to Skinner et al. (2005), male adolescents are less likely to go for health care consultation compared with their female counterparts. Furthermore, adolescents would establish a trust and good communication with professionals who are knowledgeable, honest, and experienced. Lack of trust between the adolescent and doctor prevents effective communication and disclosure about health concerns.

Adolescents are also more concerned about privacy and confidentiality like any other adult. Thus, in the initial stage of consultation both the parent/guardian and adolescent patient should be interviewed for the purposes of taking past medical and family history. Thereafter, the parent should be asked to leave and provide privacy so that the doctor and the adolescent can build trust and ensure confidentiality of information shared.

Adolescents are individuals who are at peak of growth and development (puberty). Thus, some critical areas like nutrition, obesity, exercise, injuries, and mental health need to be considered during the consultation and evaluated.

References

- Skinner, R., Viner, R., Payne, D., and Martin, C. (2005). Adolescent medicine in pediatric practice, *Archives of Diseases in Children*. 90, 1133-37. Doi: 10.1136/adc.2005.080747
- Wilkes, M. and Anderson, M. (2000). A primary care approach to adolescent health care, *West Journal of Medicine*. 172, 177-82.