

The Withdrawn Patient

Do not assume people who are withdrawn don't want to talk. There may be very good reasons why they are withdrawn:

- Depression/confusion
- Anger/denial
- Don't think you are interested in them
- Suspicion/lack of trust, confidentiality
- Fear

The following strategies may help in getting a person to talk. However it should be recognised that if a person does not want to talk about their problems and concerns it is there right to remain quite.

- ◆ Acknowledge the person seems quiet and withdrawal, or acknowledge their non-verbal behaviour (say what you see).
- ◆ Acknowledge the patient might be having difficulties in talking
- ◆ Gently confront the patient with the fact that they don't appear to want to talk
 - *"You seem somewhat reluctant to talk at the moment..."*
- ◆ Explain to the patient why you would like them to talk to you.
 - *"It would be very helpful if I could try to understand why..."*
- ◆ Label the predicament.
 - *We seem to be finding this very difficult..."*
- ◆ Acknowledge the apparent futility, but raise the possibility that talking about their problems might help.
 - *"things must seem very difficult for you, perhaps telling me about them might help?..."*
- ◆ If this does not work ... accept that the patient does not wish to talk to you, but leave the door open.
 - *"OK, I can see you don't wish to talk right now, but when you do..."*
- ◆ *If you are able to get the person to talk to you, check for depression and ask if you can refer them on for further help if they are at risk*