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Communication



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Communicating with Compassion

*I never could have predicted what a tumor
in my head would do for my life.*

It seems like a lifetime ago, but there I was sitting in my acting class in Beverly Hills, California. It was 2001, another sunny day in Southern California, because it never rains in Southern California. My husband and I had moved to Los Angeles for my acting career, and that first year it rained exactly three days. I marked those days on my calendar, as I was missing rainy days and lightning and thunderstorms.

I was a student at the Beverly Hills Playhouse in the advanced film scene class. We met three times a week choosing film roles and partners and rehearsing and studying before applying to present our scene before the entire class. I chose a scene from *Fatal Attraction*, the film starring Glenn Close as Alex Forrest, where I slit my wrists attempting suicide. The intensity of what I was going through helped me pull up the deep emotion needed for the scene. Let me just say, as an actor, you are always typecast. I was typecast either as an intelligent, no-nonsense character or boss lady like Glenn Close; a petite

slightly Southern girl like Holly Hunter; or a role with some Lucille Ball-type comedy.

Back to *Fatal Attraction*. I could not hear my acting partner. I was sitting in class when I realized that my face had also become paralyzed—Houston, we have a problem! I am an actor using my face to show emotion. People make fun of actors who Botox. Well, try having a paralyzed face where your right eye is drooping and watering constantly and your vision is blurry along with the right side of your mouth slobbering with no motor control. I could not bite, chew, or eat properly.

I don't remember my scene partner's name, but he was a cold international dude with a real hatred of women and not one ounce of emotion. Yes, acting was the perfect career choice for him. He made our rehearsals total hell.

Here's the thing. I didn't have major symptoms—no splitting headaches, no head rotations or anything like that. I did feel that something was off. I did feel like things were moving in my head. I had some dizziness and vertigo. I felt like I was an airhead—don't even say it! That tumor had to have been growing inside my head for a few years considering how large it was. If I am honest with myself, the symptoms began around 1999. Listen, I didn't want to visit negative world and stay there. I didn't want to believe something was wrong with me. You don't walk around expecting to find a tumor in your head.

Frankly, I am not a big fan of traditional doctors. For over twenty years, I had been working with holistic practitioners and energy workers and had an intense spiritual practice. Maybe these symptoms were a visit from an angel or an alien from another planet. Maybe they came to teach me something.

A few doctors I saw before said I had TMJ, temporomandibular joint syndrome, because my jaw was not opening and closing evenly or easily. In fact, any doctor who had chosen to actually look at my face and pay any attention would have seen a growth on the side of my head that in all likelihood was not original equipment.

I was trying to keep it together as all this was happening. My friend Anne from acting class was aware of what was going on with me and my health, and she said, “Don’t be an idiot; don’t do all of that stupid holistic stuff. My aunt died from breast cancer that way. You need to see a real doctor.”

After the tough love from Anne, I decided that I did indeed need to see a medical doctor. I chose a woman because I felt like a woman might take the time to look at my face, listen, and be compassionate. Dr. Karen was a short, stocky woman with red hair and a no-nonsense manner. I said to her, “My spiritual practice is intense; what is going on with my body?” I give her credit because she didn’t make fun of me. Who knew what her spiritual beliefs were, if any? She said to me in a clear, serious manner, “You need an MRI immediately.” This was an effective and compassionate way to speak with me at the time.

So the very next morning, I found myself at Saint Joseph Medical Center in Burbank, California, awaiting an MRI.

I was shaken to find that I had a fist-sized tumor lodged in the right side of my head. Well, holy crap; that sure explained a lot! The feeling of having a head full of too much air (again—don’t you say a word), vertigo, a lack of balance, not to mention that my mouth and right eye were sagging and most of my face paralyzed. It all started to make sense then. I began to cry and

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then stopped myself, for I have never been a good crier. I picked myself back up and began to make some important phone calls.

Now, I take care of my health like I run my business. I take action—there’s no messing around. TCB (takin’ care of business) as Elvis called it. I called my husband, who was on one of his weekly business trips. I called a few friends and said, “I don’t know whether you believe in prayer, but even if you don’t please pray anyway. I am in trouble and need your help.”

My no-nonsense Dr. Karen referred me to an otolaryngologist (an ear, nose, and throat specialist) in Glendale, which is right next door to Burbank. I could go on for pages about Dr. Glendale’s office, but let me just say it was one of the worst I have ever experienced. All the nightmares were present, from incompetent office staff to nurses who treated the doctor as if he were god himself, to a huge, looming audiologist who insisted on continuing to test my left ear despite the fact that I told her it was my right ear. This misogynistic doctor had a very heavy accent and a disdainful tone of voice. The final straw was the fact that my husband was with me for support and the doctor spoke to my husband the entire time as if I weren’t even there.

After leaving this chaotic office, in my heart I knew I could not tolerate a doctor who thought he was god. I needed a doctor who at a minimum would acknowledge that there is something bigger than himself. You can name this presence energy, source, God, Goddess, Buddha, Allah, Jesus, the Big Kahuna, or the great lotus flower in the sky. I was determined to find a doctor with compassion and a pleasant bedside manner, so I fired Dr. Glendale god immediately.

My next stop was the House Ear Clinic in Los Angeles. I could breathe a sigh of relief, for the communication and care were noticeably different. A biopsy was ordered, as well as a CT scan, an MRI,

and a chest X-ray. I intuitively knew that the tumor was not cancerous, but the doctors insisted on a biopsy anyway.

I had become very familiar with this clinical approach from working as a standardized patient at Johns Hopkins in Baltimore, Maryland, and at UC Irvine, California. As part of teaching diplomacy and communication skills, these medical schools hired actors to portray patients. For example, I played a woman patient with cancer and had to be told that there was nothing else they could do. The cocky male medical student entered the room and announced triumphantly, “We have exhausted all possibilities, and there is nothing else we can do for you. You will live for a couple of months at the most.” What? One of the reasons I trusted Dr. Slattery (you will meet him shortly) was because he never pronounced a death sentence over me. He did not predict, and he did not judge.

I decided not to become a medical doctor for a number of reasons, choosing instead to study energy medicine and intuition, and I completed a PhD in holistic psychology. I wanted to understand the 360° version of performance and also high achievers. The physical, emotional, mental, energetic, and spiritual all mattered to me.

My savior was Dr. William H. Slattery III at the House Ear Clinic. With a name like that, you’d think he was another ego doctor, but he was compassionate. Dr. Slattery performed the biopsy, and the test results came back as a rare bone tumor called a chondroblastoma. He said this type of tumor was usually found in the hip bones of young men and was very rare. I joked, “Well, I would only choose a very rare and dramatic tumor. What else could be worthy of all this time and attention?”

Why was Dr. Slattery a great communicator? Because he spoke clearly, slowly, and deliberately. He actively listened, had a serious personality, but he would laugh at my jokes. He spoke to me as if he

were speaking with a colleague, respectfully. Dr. Slattery also said that he would only do the surgery if he could operate in tandem with a colleague from Cedars-Sinai Medical Center who had removed the tumor from Elizabeth Taylor's brain. I said dramatically, "Well, if it's good enough for Liz, it's good enough for me!"

By the way, if you saw the film *A Star Is Born* with Lady Gaga and Bradley Cooper, then you saw Dr. Slattery playing himself as an ear doctor.

During all this, I began to visualize a successful surgery. I ate organic foods and drank tons of filtered water. I walked daily and prayed for guidance. I picked out music that I wanted played in the operating room. Dr. Slattery preferred classic rock, and I wanted one happy surgeon in my head. If I remember correctly, music by the Eagles and the Rolling Stones was played. I also asked the medical team to refrain from saying anything that was not healing or positive while I was under anesthesia, for this is the most suggestable state a human will ever be in.

Right about now might be a good time for you to take a deep breath. The surgery went well. I was on the operating table for almost ten hours while they unraveled that tricky, sticky bone tumor from my head and facial nerve! The bones in my right ear had literally been consumed by the tumor, so the doctors sealed my right ear canal. They packed my head with fat from my lower belly (that could really come in handy for getting rid of belly fat except it was only from one side).

I was in the intensive care unit for several days, and I could not even get up to pee. Not because of the turban on my head or the twin braids (allowing fluids to drain) coming from the right side of my head. But because there was a new pain now coming from my lower belly.

It's a good thing they keep you dazed and confused so that your body is not thrown into a state of shock after the anesthesia and pain meds wear off. Not to mention, you see how bad you look, but you don't care because you are *alive!* The good-looking, kind male nurse from Kentucky (yep, there was a nurses' strike going on in LA) was kind and strong and would rotate my body because I sure as hell couldn't lift myself or turn.

The wounds did not heal, and let's just say that I wish I had purchased stock in bandages. Six months later, on April 15, 2003, I was back in the hospital because I had an infection caused by the first surgery. After that, I could finally go home and begin to heal. I had just enough energy to shower or walk or make a couple of calls each day. Sleep was precious. Dr. Slattery's orders were not to make any fast moves and not bend from the waist or lean over.

Here is one of the most puzzling things of all: afterward, no doctors came and talked to me about how I'd healed so fast or how I'd restored my health. I offered to be a counselor for others going into surgery with a tumor like mine and left my contact information with the House Ear Clinic staff. No one called. Ever. I know that these are conversations that matter and should be included in research.

If you can imagine any illness or trauma that has ever happened since life began, you can also find a person who has healed from that very thing. That is the person I would track down to the ends of the earth and ask what they did and what they learned. Would you ask a person who never had a tumor in their head what it's like? That makes absolutely no sense, but that's what I saw people doing.

Now, why practice compassion? Because you will have more positive influence when people like you and want to follow your lead. People will cooperate better. You will be aware of the fragility and preciousness of life and that folks, including you, are vulnerable. You will

feel more connected to others in contrast with the frequent isolation and loneliness of running a company. And this all begins with you having compassion for yourself. Yes, it begins with you.

Let's say you are preparing a presentation to five hundred potential clients. How does all this apply to you? Because you learn to tell your story and speak with clarity by saying what matters. You learn to get to the heart of the matter and stop speaking aloud the inner dialogue going on in your head. Why does this matter? Because this way of speaking comes across as static and lacking cohesion, making it hard for us to follow you.

I learned so much about the art of truthful and compassionate communication during my illness. Part of my fast healing was because Dr. Slattery admitted that doctors don't know much about the type of tumor I had. I trusted him because he was willing to share this. His manner and speech were consistently calm and reassuring. Now, you also want your brain surgeon to be supremely confident. A friend of mine, Cathy, is a therapist who works with neurosurgeons, and she said, "You want them exhibiting some arrogance, because they cannot handle death and losing a patient." I also felt safe going into surgery because of the discussions that Dr. Slattery and I had about what the surgery would be like. Just like any life-changing event that you face, you *plan* for a positive outcome.

This is the first chapter in my book, and it is potentially the most advanced because it talks about compassion and being considerate of other people's feelings. This chapter *seems* to be about illness and death. However, if you can master the compassion lesson, your conversations will transform and the next chapters on communication will be easier.

Here in the United States, we are pretty uncomfortable and not well skilled talking about illness, trauma, or death. I was absolutely

shocked and wounded at some of the things people said to me when I was going through this incredibly painful time in my life. The lack of compassion was stunning to me, and I couldn't believe some of the things I heard.

Here are some of the big offenders with a suggested reply that will offer you some emotional protection. I wish I had spoken up in a clear and strong way at the time. It would have defused my anger, and I would have taken care of myself emotionally.

☞ Is it cancer? No? Then it will be alright.

So cancer is that big bad, nasty death sentence, but a large benign tumor really is nothing at all?

☞ It's not cancer, so what is the big deal?

A tumor the size of a human fist lodged in the side of my head and rapidly creeping into my brain lining—that's the big deal.

☞ I understand.

No, you don't.

☞ You must have been a horrible person in a past lifetime; you are now paying the price.

Thanks for sharing. That's a really deep thought (you must add a very sarcastic tone to your voice for this one).

☞ This is karma for past bad things that you did.

What a compassionate and wise thing to say (again, a touch of sarcasm must be used).

☞ You only hear from one ear, so now you're handicapped.

There is nothing handicapped about me.

Some of you have faced illness or trauma, and well-meaning folks have said things to you. Forgive them for they know not and forgive yourself if you did not speak up. Let me teach you a new language—the language of communicating with compassion, sensitivity, and grace.

People have a right to every feeling even if it is uncomfortable or sad for them. That emotion is bringing them an important message. What a person is feeling is what they are feeling. I don't like when feelings are labeled positive or negative. Who gets to decide what is positive and what is negative?

Here are my top rules for communicating with compassion:

- ❧ My number one rule is don't ever say you *understand*. You don't, and you never will.
- ❧ One way to express compassion is simply to say, "I don't know what to say. Is there something I can do to help you feel better?" One of my friends in Los Angeles asked and brought me a piece of decadent chocolate cake from my favorite bakery.
- ❧ You could also say the following to someone who is facing their own mortality or a loved one's decline, "I wish I knew what to say right now, but I just don't."
- ❧ Please do not minimize or diminish our experience. It is not your job to fix us, think you can do better, or tell us what we should be feeling.
- ❧ People seem to think that c-a-n-c-e-r is a death sentence. I was dismayed to find that 99 percent of people asked me whether it was cancer. Instead, ask a person, "How do you feel about this?"

- ☞ The tumor in my head was my reality at the time, and I was facing it head on (pun intended). Acting like it didn't matter or asking *why me* or feeling sorry for myself were not my choices because how would that help? Don't dare suggest to someone that they are feeling sorry for themselves.
- ☞ Be mindful of ever calling anyone handicapped or disabled. Folks have different abilities and ways of learning, but no person should be pronounced disabled. They may have been injured and now have different abilities because of it. Let's not label folks based on what we think. If someone calls themselves blind or deaf, then you may use the same word. Listen for clues. When you are unsure, ask.
- ☞ Here's another suggestion while in conversation: I have never been in the hospital before, is the food really as bad as they say? When in doubt, ask gentle and thoughtful questions and then listen. I was keenly aware of how uncomfortable people were around me at the time. People would literally back away from me as if I were a monster. In fact, nearly every one of my "friends" rapidly disappeared instead of risking a deep conversation about illness and mortality.
- ☞ Don't share stories of how your cousin died or tell us we really should do more research or give us all kinds of helpful suggestions. If you do have a great resource, ask if it would be helpful to share. During this time people are so overloaded with fear and worry and so much information that they can't take on even one more piece of knowledge.

Now it's your turn. I have shined the light on compassionate conversations. All compassion begins with self-compassion, and with self-compassion solidly in place, we can then feel it toward others.

Think of that vulnerable person in front of you who probably holds the same dreams that you do, and promise yourself that you will do better in your conversations with others around sickness, sensitive topics, and death.

Three Ways to UpLevel Your Communication with Compassion

1. If you're a boss—practice compassion. Do you take the time to know your employees on a personal level and understand that they are not transactions but essential to your company? At a minimum find out when their birthday, anniversary, or major positive life event is and then acknowledge them on that day. There are plenty of programs and apps that can trigger reminders. You, the boss, can personally sign a card and have it delivered to their desk or home.
2. Speaking of respectful, inclusive language—the other part of successful communication is listening! Stop interrupting people, and listen without focusing on what *you* are going to say next. The very best listeners in the world are also seen as confident and successful.

Even trees listen; modern science tells us that one of the greatest recording devices in the world is wood! Scientists have been able to extract voices and various sounds

from trees. Trees record the sound of birds singing and roosting in the limbs.

3. Be vulnerable. It is only immature executives that yell at people or make demands. Does it really make any sense to yell across the office or have a temper tantrum over Zoom? Provide training to your people, give them appropriate authority, and allow them to excel. Exhibiting vulnerability reflects your humanity, confidence, and true power and will bring you loyalty.