



COM 3401

Business and Professional Communication

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COM 3401 Business and Professional Communication



Lecture Two (part one)

- ▶ Barriers to communication
- ▶ Organizing our presentations
- ▶ Citing sources



Barriers to Communication

cliché [klee-shey]

A cliché is an idea which has been overused to the point of losing its original meaning or effect, especially when at some earlier time it was considered meaningful.



Today I want to revisit Barriers to Effective Communication. Especially linguistic barriers.

When we look at sample resumes and cover letters, we sometimes see phrases like this:

I have excellent communication skills.
I'm a team player.
I'm detail oriented.

I call these clichés. They are overused, and don't tell the reader much, except that you lack individuality.

Don't tell, show!
Instead of telling us you are good at communication, provide a specific example:

While I was receptionist at Acme, I set up a spreadsheet with all the customers in our database, noting their kids names. This provided for a more personalized interaction with the customer.



Barriers to Communication



Other barriers to communication:

Jargon- when we use a lot of technical words and just assume that the HR rep knows what they are.

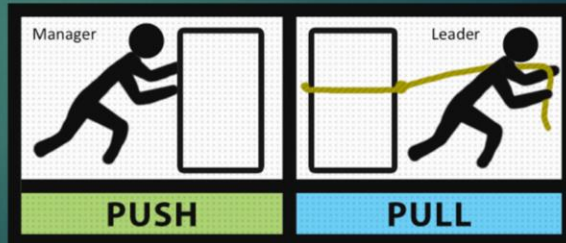
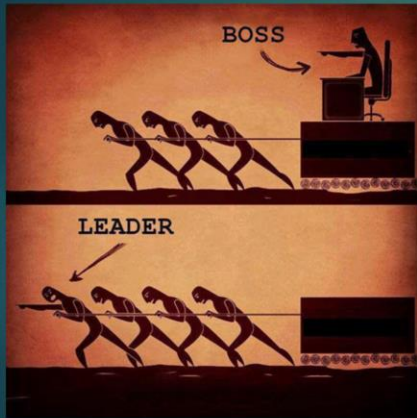
Vernacular- When we use informal language

Sexism/ racism

Double-speak, aka euphemism. The phrase "you're fired" sounds harsh, so instead they say "I'm afraid we have has to make some structural adjustments" (etc.)



Leadership



How about institutional barriers?

Good leaders listen and are approachable. In highly stratified organizations, communication with the higher ups is limited. Sometimes the organizational barrier manifests as a physical one, for example, the higher ups are on a higher floor of the building and rarely see what happens on the day to day level.

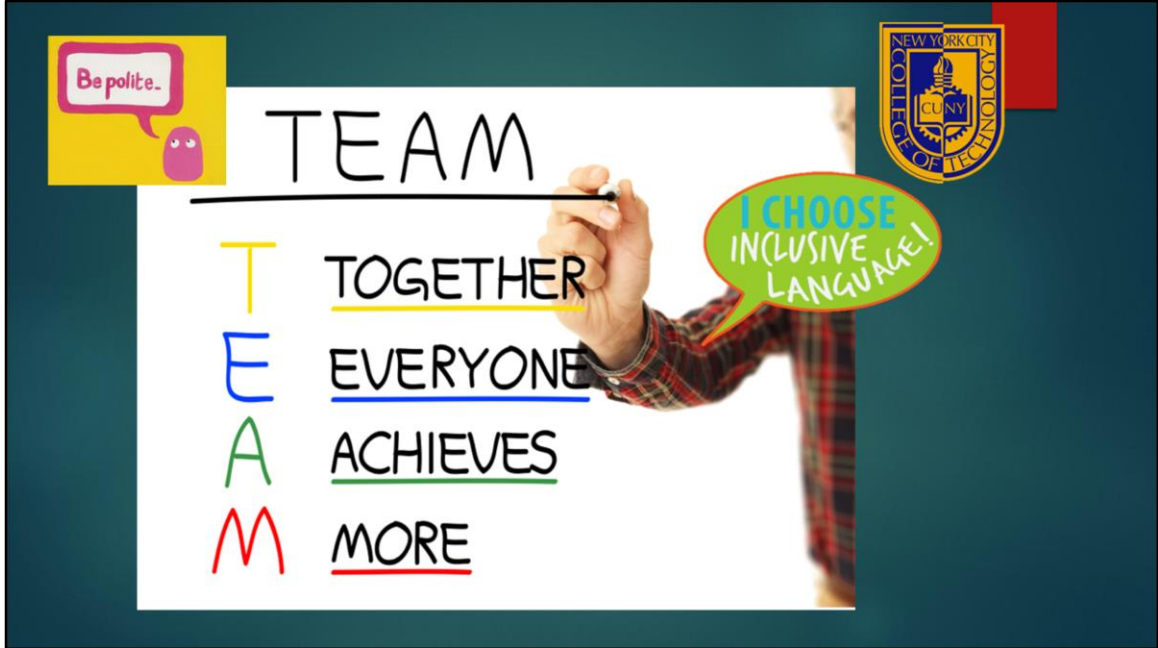


Discussion question: Are there alternatives to hierarchy?

That's not to say that the answer is flattened, horizontally organized institutions. Heterarchy, as we have seen, is not without problems. For one, these situations can be chaotic because it is unclear where the directives are coming from. In these situations, there can be a vying for power and supremacy that tugs the underlings in different, contradictory directions.



**How does what I just
said effect this class?**



By now, we have established teams based on similarities in career goals, educational paths and experiences. Often what we hear about teamwork is clichéd. In reality, achieving true parity in teams is easier said than done. As I'm sure your experience in group projects can attest to, there are often group member that can slack off, assured in the knowledge that the hard workers will carry the group.



Lecture Two (part two) Groups and Presentations

Comments,
recollections from
last time we met
in groups?

I'd like to take a chance to reflect on our group process from last time. In what ways do you see the affinities of each member? How can you support each other and build on each other's strengths?




Lecture Two (part two) Groups and Presentations

My thoughts on groups:
-3 to 4 members per group is probably best
(discuss?)
-Groups to choose a broader topic and
each member presents on one subtopic

Based on my experience from last semester teaching this course, the larger the team, the more variables are involved affecting the outcomes. The triad (a three person team) is probably most advantageous, but I am open for discussion.

In addition, I recommend choosing research topics that are complimentary of each other. For example, a team of construction managers can present on different aspects of the building process (say, design, materials and timeline?). This way, the team is not covering the same areas and reinventing the wheel each time.



"Communication in Health Care"

Introduction
Grab attention, state topic and purpose, provide thesis, give preview of each sub topic

Body

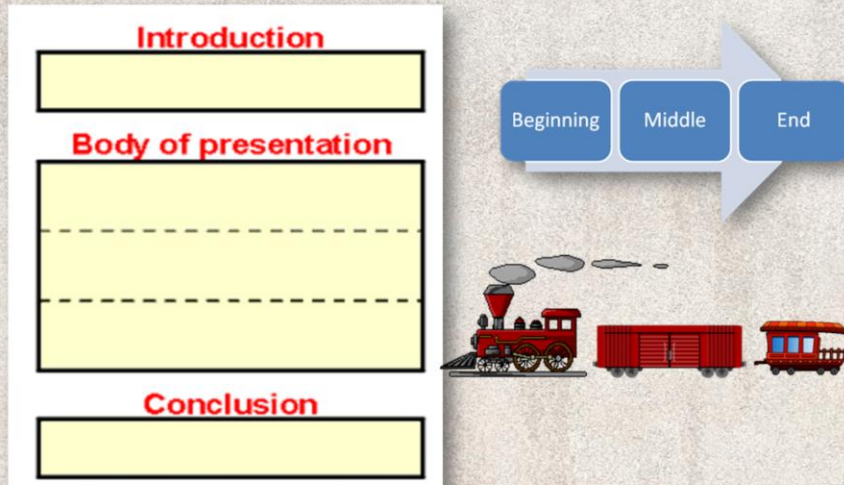
- Esther- "Communication issues in the news"
 - Zika virus
 - Presidential Candidates on Health Care
- Kevin- "Bio-informatics and communication"
 - HIPPA issues with eHealth
 - How to communicate CAT scans
- Zhang- "Nursing and Communication"
 - Communicating with patients
 - Communicating with doctors

Conclusion
Summarize each subtopic, find common themes across them all, restate thesis, "clincher"

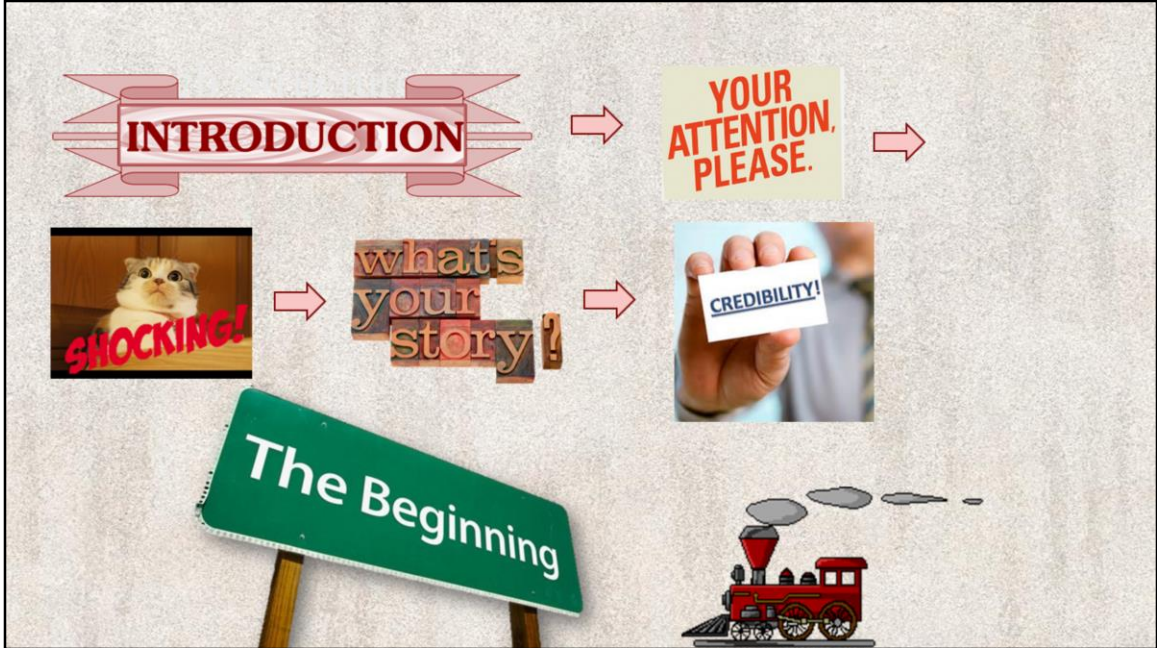
Rough outline

Lets take a look at a hypothetical "group outline"—Imagine that each individual speech is a "sub-topic" or a more general topic, such as health communication.

Presentation Structure



Now lets talk about the main components of your individual presentation. Each presentation must have a beginning, middle and end.



Introduction should

- grab attention and make the topic relevant to a general audience
- Establish credibility by telling us why you are interested
- State your main idea (thesis)
- Give a preview of main points



The Body



KEY POINTS

STAKE
YOUR CLAIM



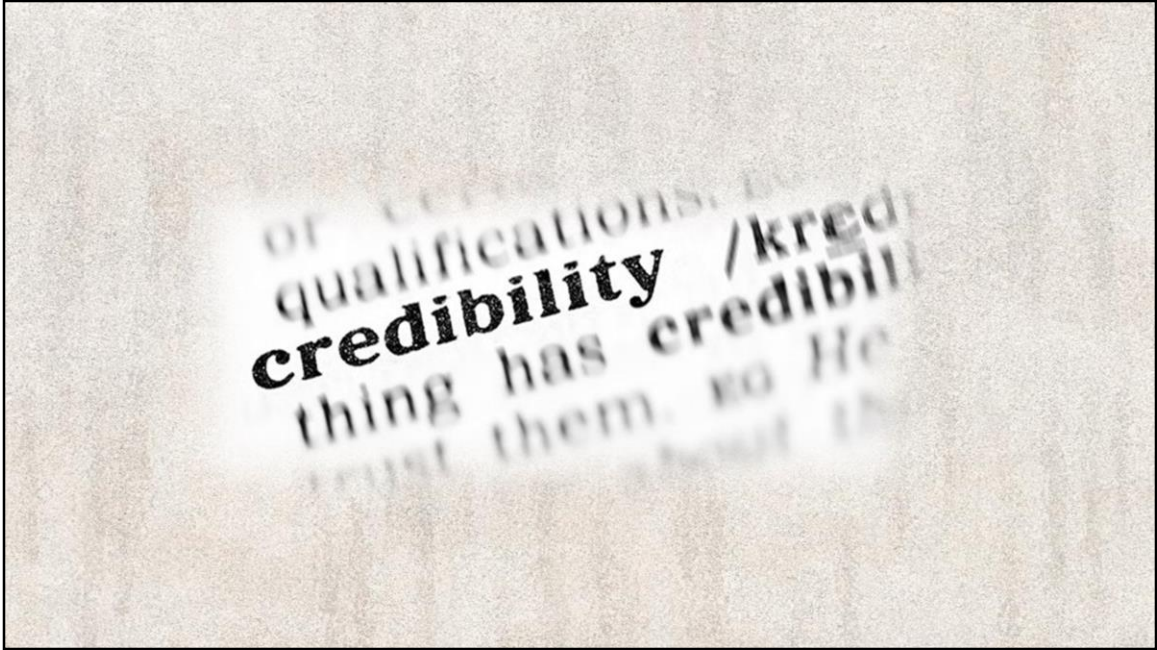
The Body of the speech

- Contains all of your information
- Gives two or three main points (claims) that you back up with two or three sub points, providing evidence to support your claim.
- Cite your sources out loud (for example 'According to the New York Times...')
 - as well as in two places on your outline:
 - "In text" whenever you drop a fact using (Author, year)
 - In the Works Cited section at the end of your outline (Author, year, title of article, title of source, url).



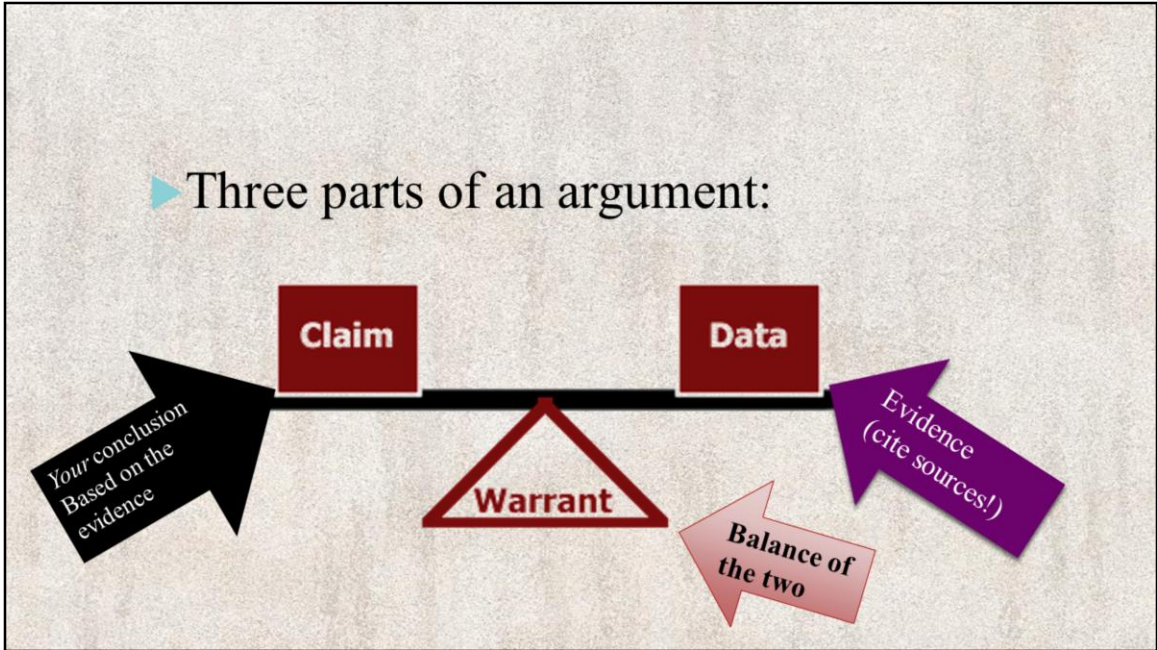
Conclusion

- Summarize your main points
- Repeat your thesis or main idea
- Provide a “clincher” or a final sentence that signals to your audience you are finished



Credibility starts with you. What makes you interested? What did you do to learn about the topic? Tell us, in advance, about the sources you have found.

▶ Three parts of an argument:



Your main point should be a claim. Your sub points should be examples that support your claim. Then you have a warrant or “warranted claim.”

For example

Main point “Its important to get a flu shot.”

- The CDC recommends getting the shot as soon as it becomes available (“What Should I do to Protect....” 2016).
- Even late in the season, its not too late to get the vaccine, according to the Huffington Post (Walaza, 2016).

See how I made a claim, and then backed it up with evidence from reputable sources.



Note: Plagiarism will not be tolerated.

So many students don't understand it, and I see them falling head first into the jaws of failure.

You need to cite in 3 places. Anything less is plagiarism!

Cite out loud while speaking. ("According to the CDC...")

Cite "in text" right after you state a fact on your outline (Jones, 2016). Then the reader can turn to your works cited and see a detailed citation of Jones, 2016. It looks like this

Jones, J. (2016). Title of article or webpage. Name of website. Date. Retrieved from:
<http://www.nameofsite.com/nameofwebpage>

Cite your Sources *

Web page **Author** **Date** **Title of page** **URL**
Wood, D. (2009, January). Agoraphobia. Retrieved from
<http://www.med.nyu.edu/conditions-we-treat/conditions/agoraphobia>

Web page with no author or date
Phobias. (n.d.). Retrieved from http://medicalcenter.osu.edu/patientcare/healthcare_services/mental_health/mental_health_about/phobias/pages/index.aspx

Here is an example of how your citation should look in your Works Cited section. Note I prefer APA style, but you can use your preferred style, as long as your citation contains ALL of the following:

Author, Date, Title of Page, Title of Website, URL

No author? No date? Try not to use these sources too much, but if you must, then see above.

From the syllabus week 4

We will discuss the criteria for the Draft Outlines that will be due on 3/07. Examples will be provided and we will meet in groups to strategize for the group project, brainstorm for the subtopics and each member will choose a subtopics. Your homework will be to research your topic and subtopic and draft your portion of the Group Presentation.

Lets get back into groups and consider how we can each present on different topics without duplicating each other.