The Importance of Nonverbal Communication in a Healthcare Environment

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Abstract

This research review examines whether nonverbal communication in the healthcare field plays an important role in the process of good patient relationship. By teaching the significance of gesture, nods, smiles, grimaces and frowns, and their interpretation when communicating can lead to a better understanding of your patient’s condition. There is a growing awareness of the value of nonverbal communication; more and more studies have focused on quantitatively evaluating nonverbal behavior including the patient satisfaction perspective (Finset, 2007). In a patient-nurse professional relationship, our conversations must be therapeutic, goal directed and aimed at helping patients heal. Understanding the importance of nonverbal communication in a health care environment is crucial for all parties involved.
The Importance of Nonverbal Communication in a Healthcare Environment

Studies show that nonverbal communication represents over 55 percent of all communication (Mehrabian, 2009). If the estimate is accurate, then positive body language is essential to nursing communication (Holland, 2012). Often the nonverbal cues or the paralinguistic elements of speech rather than what is actually said betray true feelings and emotions. By developing nonverbal skills, you can increase an awareness of body language, enabling nurses to better read and interpret their patients’ physical and emotional signs while simultaneously mirroring their own verbal communication. In some cases when observing patients nonverbal cues, a health care provider can learn more from a patients nonverbal cues than from listening to their verbal communication.

The purpose of this research is to answer the question: Does positive body language/nonverbal communication influence the therapeutic, goal directed healing process of our patients? After examining the most current work by researchers on this topic, I have concluded that being aware of patients and our own nonverbal mode of communication actions sometimes speak louder than words. Teaching the significance of gestures, nods, smiles, grimaces, and body posture will have a significant impact on how you say what you say.

Review of Literature

Nonverbal Studies

Albert Mehrabian conducted two studies that brought the elements of nonverbal communication out in the open for all to ponder. Mehrabian (2009) published his studies on the relative importance of verbal and nonverbal messages. His findings on inconsistent messages of feelings and attitudes have been misquoted and misinterpreted throughout human communication seminars worldwide and have become known as the 7%  38%  55% rule on the impact of words,
tone of voice and body language when speaking. Mehrabian came to two conclusions including three elements in any face-to-face communication, words/tone of voice/nonverbal behavior. He stated that nonverbal elements communicate feelings and attitude, when the words disagree with the tone of voice and nonverbal behavior, individuals tend to believe the tonality and nonverbal behavior.

Nonverbal communication not only includes what we say but how we say it. Holland (2012) states that body movements such as nodding, smiling, and facial expressions in addition to our personal space between patient and caregiver can affect the positive experience for the patient. An excellent tool for clinical staff is the five-step body check/reality check to assist in becoming aware of your nonverbal communication. These steps include:

1. Face – your face transmits emotion
2. Shoulders – remember good posture do not carry stress
3. Hands – keep them open and relaxed
4. Hips – face toward the patient it is where your attention should be focused
5. Toes – how much space between you and your patient

Emphasis is on the therapeutic nature of medicine; nurses have a real need to communicate effectively from day one. Proper proxemics is important due to nurses providing treatment and care as well as discussing personal information with their patients that often require close personal contact. Positive nonverbal body language makes for a comfortable, more tranquil patient, which in turn creates a positive patient experience.

A study by O’Hagen, Manias, Elder, Pill, Woodard-Kron, McNamara, Webb, & McColl (2014) examined the feedback provided by nurse educators and clinicians on the quality of
communication skills of nurses when simulating interactions with patients. Highlighted is the feedback on nonverbal communication with the central relevance of patient centeredness concurring with patient perspective for effective communication. This study endorses that the quality of communication in interactions between nurses and patients have a major influence on patient outcomes. A good understanding of what constitutes effective nonverbal communication is crucial for this undertaking.

Patients spend more time communicating with nurses than with any other healthcare professional; they can be oblivious to nonverbal cues. Mausehund, Timm, & King (1995) conducted a study to determine the ability to recognize nonverbal messages. Developing nonverbal skills can increase an awareness of body language, enabling nurses to better read and interpret their patient’s physical and emotional signs. In doing so, they realized that diversity-training exercises could assist in students discovering how they are involved in the interpersonal communication of nonverbal influences. Nurses who are aware of nonverbal messages are likely to become better receivers and senders of messages. With training, they can learn no matter how detached and impartial they think they are concerning a situation, nonverbal cues can have a highly subtle and complex impact on every communication encounter.

On many occasions, communication breakdowns may occur due to the inability to read a patient’s nonverbal behavior. Pressman, Newman, & Pearson (2009) discuss the communication breakdowns between patient and caregiver, which may have dismal consequences in patient care. Although there is a set of simple tools and strategies in place that quickly and effectively improve communication, the tools are rarely utilized due to lack of knowledge and access. These barriers create feelings of anxiety, fear, frustration, unrecognized pain to patients. The authors have designed a tool kit program nationwide for hospitals that assist with communicating with
patients that have backing from hospital administrators. The tool kit to help mediate communication barriers includes:

- word / picture board
- modified call bell
- pocket talker
- writing board with writing strategies
- magnifying glass
- translation cards

By addressing the basic needs of the patients, it can break down the communication barriers that result in feeling of anxiety, fear, frustration, and overall loss of control.

How physicians communicate in a clinical interaction also influences the patient’s health and well-being. The nonverbal behaviors are a critical factor to consider when examining the nature and delivery of clinical care. Ledford, Canzona, & Cafferty (2015) conducted a study that analyzed and studied clinical interaction using objective structured clinical examination (OSCE). Nonverbal behaviors can be misread and not easily censored. It actually represents a more accurate picture of what is communicated, being perceived as more authentic. The various nonverbal behaviors including eye contact, head nodding, body orientation are listed and their potential effects. Building an understanding of how these nonverbal behaviors are used can shed light on the manner in which physicians balance the demand of providing medically instrumental and emotional care. The study examines how the use of nonverbal behaviors in line with effective patient centered care in various clinical contexts may be an important first step to improving nonverbal patient centered communication between physicians and patients. The
methodology of this study produced the results of when the provider adheres to the patient’s expectations of their role, the more the patient is satisfied with the encounter. If the provider is disengaged, the patient will believe that they are disinterested or dismissive.

In addition to the above, Verlinde, DeMaesschiak, Deveugele, & Willems (2012) conducted a systematic research of literature published between 1965 and 2011 on the social gradient in doctor-patient communication. Twenty original research papers and meta-analyses were included. The social differences in a doctor-patient communication described to the following classification: verbal behavior including instrumental and affective behavior and nonverbal behavior and patient centered behavior. This review indicates the importance of the reciprocity of communication, that by increasing the doctors’ awareness of communicative differences, in addition to empowering patients to express their concerns, would indeed establish a more effective communication between doctor-patient. When both parties use nonverbal signals effectively to communicate positive effort, they sense a more trusting climate in which they can openly take part. This research quantifies the importance of nonverbal communication being essential in establishing a positive doctor-patient relationship.

Pinto, Ferreira, Oliveira, Franco, Adams, Maher, & Ferreira (2012) conducted extensive research between the clinician and patient stating the importance of communication and the style expressed. One of the key communication factors investigated was nonverbal behavior that includes posture, facial expression, and body orientation. They identified fourteen nonverbal factors and all of them categorized as both patient facilitating and patient involving. The research stated that clinical staff should be aware of simple factors related to body postures such as asymmetrical arm posture, and crossed legs due to their negative association with the therapeutic alliance. They also should not employ body orientation away from the patient. Their studies
found that an essential skill to master effective communication in clinical practice could improve quality and efficiency of care.

**Conclusion**

Healthcare communication does not rely only on what is said, but also on the manner or style in which it is expressed. Techniques as simple as a touch can be an effective form of nonverbal communication that happens instinctively. A nurse holding a patient’s hand or maintaining eye contact can build rapport and shows that they are interested in what they have to say. The research question proposed affirms that nonverbal communication or one’s body language including physical appearance, physical distance between caregiver and patient, tone of voice, and facial expressions all affect the outcome of a positive patient experience. The evidence concludes teaching the significance of gestures, nods, smiles, grimaces, and body posture will have a significant impact on how you say what you say. The key result of my research tracks the duration of healthcare professionals’ nonverbal communication as being an important aspect of the diagnostic and therapeutic, goal directed healing process for a fulfilled, satisfied patient. The importance of nonverbal communication in a healthcare environment should not be underestimated.
References


