Nonverbal Communication: Using

What is Involved in Using Nonverbal Communication?

› Communication is an intentional behavior used by individuals to fulfill needs (e.g., obtain food, maintain relationships, personal expression, provide information, alleviate discomfort) and convey thoughts. Nonverbal communication (NVC) is the conveying of meaning and understanding between individuals without the use of spoken words

• What: NVC refers to any form of communication not involving speech and consists of
  – eye contact (Figure 1)
  – facial expressions (e.g., a smile or the absence of a smile)
  – touch (e.g., hand shake, pat on the back or arm)
  – interpersonal distance (i.e., the amount of space or physical barriers between persons)
  – gestures (e.g., nodding the head, making welcoming gestures with the arm, offering to shake hands by extending the arm, using sign language, pointing, acting out concepts)
  – posture (e.g., stiff, relaxed)
  – tone of voice

• How: NVC occurs concurrently with speech as well as in place of verbal communication. NVC can be used to convey attitudes and emotions and to contradict or support the spoken word

• Where: NVC is used in all cases of person-to-person contact and in any setting where health care is provided (e.g., outpatient, clinic, hospital, home)

• Who: In the healthcare setting, NVC occurs between patients and nurses, nurse practitioners, physician assistants, physicians, social workers, case managers, and other healthcare staff that patients encounter

Figure 1: The bedside nurse has many opportunities for nonverbal communication. Copyright© 2014, EBSCO Information Services.
What is the Desired Outcome of the Use of Nonverbal Communication?
› The desired outcome of using NVC is to overcome communication difficulties with patients and to help with the provision of appropriate care that meets the needs of the patient

Why is Nonverbal Communication Important?
› All persons use NVC as a component of communication. In patients who never acquired speech or have lost the ability to speak (e.g., due to stroke or intubation), NVC is the only form of communication that is possible
• NVC is a method for patients to convey their needs and desires to healthcare providers
• Interpreting the NVC of patients allows healthcare providers to better understand patient needs and to provide improved patient care
› Patient satisfaction with a healthcare provider is related to the NVC the patient experiences during the time spent with the clinician
› NVC exhibited by a healthcare clinician can provide patients with feelings of trust, confidence, security, and faith about the clinician
› NVC is necessary to convey emotions (e.g., of love or support)
› NVC can be used to identify if there is a discrepancy between the spoken word and a person’s true feelings or desires

Facts and Figures
› It is estimated that when a message is communicated between individuals, 55–97% of the message is conveyed by nonverbal means (Caris-Verhallen et al., 1999)
› One of the goals of Healthy People 2020 is for all individuals, regardless of communication abilities, to have access to full participation in the healthcare system without barriers (United States Department of Health and Human Services, 2017)
› The NVC demonstrated by healthcare professionals, particularly tone of speech and body language, was found in an interview-based study to have a profound impact on critically ill patients’ perceptions of wellbeing and self-worth. Demonstrating emotional engagement through eye contact, touch, and a positive tone of speech, as well as allotting time to be “present,” were highly valued by patients, whereas “busy body language” and lack of facial expression made patients feel like they were an inconvenience to those caring for them (Timmerman et al., 2017)

What You Need to Know Before Effectively Using and Interpreting Nonverbal Communication
› NVC is most effective when it is reciprocal
› NVC is facilitated by the provision of consistent and reliable care by healthcare providers
› The NVC of healthcare providers affects the adherence of patients to their prescribed treatment regimen, clinical outcomes, and patient satisfaction
• Tone of voice can be a reflection of a person’s emotional experience
  – A positive tone of voice has been linked to positive satisfaction reports from patients
• Eye contact between the clinician and patient indicates to the patient that the clinician is listening
› Healthcare providers need to be competent in interpreting nonverbal behaviors of patients and aware of their own nonverbal behavior and how patients interpret it. Interpreting NVC requires use of all the senses
› The appearance (e.g., dress [e.g., white lab coat, casual business attire]) of the healthcare provider affects communication with patients, as does the characteristics or presentation of the examination room (e.g., décor, photographs) or meeting location
› Quality of care and the ability to meet patient needs is affected by understanding and being understood
• Difficulty communicating causes patient distress and can have a negative effect on their coping ability and psychological (e.g., depression) and social (e.g., isolation) status during illness or when injured
  – Establishing a form of NVC to allow for understanding of the patient is vital in promoting the well-being of patients and helping them recognize that they are being understood
› Patients may act out emotions (e.g., anger, frustration) due to their inability to verbally express the feelings that are connected to the emotions
› It is the responsibility of the healthcare provider to recognize and respond to NVC of the patient
• Many patients who lack the ability to speak have mastered using NVC to have their needs met
• Individuals with learning disabilities or cognitive impairment can appropriately express themselves and their needs through NVC (e.g., coughing to signal that they are thirsty)
• Determining an effective method of communication with a nonverbal patient requires a trial-and-error approach, which can take time, patience, and diligence on the part of the healthcare provider
  › NVC is affected by a person’s culture (e.g., physical gestures and dress vary among different cultures)
  › Although NVC is a component of communication with all patients and there is no specific preparation for enhancing NVC with most patients, certain steps can be performed to maximize communication with nonverbal patients. Preliminary steps that should be performed before initiating communication with a nonverbal patient include the following:
    • Review the patient’s medical history/medical record to identify
      – any underlying illness or event (e.g., stroke) that prevents the patient from communicating verbally
      – methods of communicating that have been successful in the past, if the patient is nonverbal
    › Gather supplies, which include the following:
      › Facility-approved visual aids (e.g., Faces pain scale, pictures, letter board, DVDs/videos)
      › Supplies specific to the care provided or procedure being performed

How to Effectively Use and Interpret Nonverbal Communication
  ‣ Stand an appropriate distance from the patient when speaking (e.g., 2 ½ feet/0.75 m, unless simultaneous physical contact is necessary), so as not to invade the patient’s personal space or, on the other hand, seem disinterested
  › Convey that you care using eye contact and appropriate facial expressions
  › Lean forward toward the patient so that your posture indicates involvement and interest
  › Avoid speaking in a rushed, loud, or gruff tone of voice
  › Allot sufficient time for the nurse-patient encounter
  › Avoid actions that can be interpreted as showing hurriedness, such as crossing the arms or checking your watch
  › Use therapeutic touch for comfort
  › Observe the patient and assess his/her NVC
  › Pay attention to the patient’s facial and physical gestures (e.g., hand and foot movement, posture, eye contact, expressions) to understand what he/she is communicating
  › For nonverbal patients, identify and utilize the method of communication (e.g., specific gestures or noises) that has been established by the patient
  › Incorporate facility-approved visual aids (e.g., Faces pain scale, pictures, letter board, DVDs/videos) to enhance communication
  › Utilize professional interpretation services (e.g., sign language) according to facility protocols
  › Document elements of NVC in nursing progress notes, and update the patient’s plan of care as necessary to reflect communication needs

Other Interventions That May be Necessary Before, During, or After Effectively Using and Interpreting Nonverbal Communication
  › Review the patient’s medical records to identify alterations in communication and methods of communicating that have been used successfully in the past
  › Allow adequate time to document and make notes following each patient interaction to be sure that detailed and accurate information is recorded regarding NVC methods that are effective with the patient

What to Expect After Effectively Using and Interpreting Nonverbal Communication
  › All information pertaining to and disclosed by the patient will be considered confidential to maintain patient privacy

Red Flags
  › Avoid leaving a patient, who is without speech and reliant on NVC, alone in an unfamiliar setting
  › Failure to accurately interpret NVC used by patients can lead to a loss of trust in healthcare providers and poor treatment outcomes (e.g., unmanaged pain)

What Do I Need to Tell the Patient/Patient’s Family?
  › Individuals with disabilities (e.g., persons who are nonverbal) have a legal right to receive equal treatment (e.g., public school education)
  › Individuals without speech who are dependent on NVC require frequent visual checks and should not be left alone in an environment that is not age or developmentally appropriate
Patients may act out emotions (e.g., anger, frustration) due to their inability to verbally express feelings.

A person’s true feelings or beliefs, despite what may be spoken verbally, can often be identified by assessing his/her NVC.

References