

Verbal and Nonverbal Cues

HAVE YOU NOTICED how a person's words and actions may not match? For example, you may ask a friend how she is doing. She may say, "I'm fine," but her shoulders are slumped and she has a sad look on her face. You have to recognize the clues her body is giving, in addition to the words she is speaking. In this unit, you will learn more about those verbal and nonverbal cues as well as how you can respond to them to improve the communication process.



Objective:



Describe verbal and nonverbal communication.

Key Terms:



active listening
body language
communication

nonverbal cues
paralanguage
receiver

sender
verbal cues

Communication in Health Care

Most jobs require communication skills. Medical assistants interact with patients, their families, co-workers, and supervisors on a daily basis. Strong communication skills allow them to handle those interactions more effectively.

TYPES OF COMMUNICATION

Communication is the exchange of information. It requires at least two people—a sender and a receiver. A **sender** is a person who creates and shares the message. In contrast, a

receiver is a person who listens to or observes the message. A medical assistant must communicate with patients, their families, co-workers, and supervisors.

Verbal

Different forms of communication exist. For instance, **verbal cues** are spoken words that convey a message. Verbal cues can share facts, ideas, opinions, or feelings. Regardless, verbal cues must be clear and accurate. Use proper terminology, and consider the audience. For example, decide whether it is more appropriate to use simple words or complex descriptions when communicating with others. Verbal communication is related to written communication, because they both rely on words to convey a message.

Nonverbal

Nonverbal cues are messages that do not include spoken words. Experts estimate that at least 70 percent of communication is nonverbal. These cues help determine the true meaning or feelings behind the words, but they may be misinterpreted.

Types of nonverbal cues include body language and paralanguage. **Body language** is the use of body and movements (e.g., posture, facial expressions, gestures, and eye contact) to convey a message. Examples are posture, facial expressions, gestures, and eye contact.

Paralanguage is the tone, rate, and volume of a person's voice.

Active Listening

Active listening is a process in which the listener offers feedback to the speaker to ensure he or she understood the message. It requires the listener to give the speaker his or her full attention to observe verbal and nonverbal cues. It helps the speaker know that the message was received and may prevent misunderstandings. The listener has a chance to ask questions and clarify information.

VERBAL CUES

It is important for a medical professional to recognize and respond to verbal cues to ensure good communication. To do that, you must be able to recognize barriers to verbal communication. In some cases, you may work with patients who primarily speak other languages or have impaired hearing. Some patients may have limited medical knowledge or language skills. This may make it difficult for them to understand complicated explanations or effectively express their concerns or questions. Some patients may be intentionally or unintentionally vague about their symptoms or pain levels.

Responding

You can improve communication by responding to verbal cues. Speak loudly and clearly, and write down important information or instructions if a patient is having trouble under-

standing or hearing you. Bring in a translator when necessary. A bilingual translator can convey information to a patient who speaks another language, and an American Sign Language translator can convey information to a patient with hearing impairment.

Use simple language, and avoid complicated medical terminology if possible. However, you should avoid the opposite extreme of “talking down” to a patient. Fully explain procedures, tests, and diagnoses. Ask additional questions to encourage patients to give more information. Active listening skills will help you ensure understanding exists between you and the patient.

Five C's of Communication

Use the five C's of communication, as described by Patricia W. Iyer in *Legal Nurse Consulting Principles and Practice*:

- ◆ Complete—Provide all necessary information.
- ◆ Clear—Articulate each word clearly.
- ◆ Concise—Be brief, and avoid unnecessary information.
- ◆ Cohesive—Provide an organized message.
- ◆ Courteous—Show respect and kindness.

NONVERBAL CUES

Much of the communication process relies on nonverbal cues. Pay attention to “how” patients say something, not just “what” they say. This is especially important when patients are sick or scared and may not be communicating clearly. Nonverbal cues may reinforce the words a patient is saying, or they may contradict the verbal statement.

It is important to recognize patients' nonverbal cues. For example, nervous patients may fidget or avoid eye contact. Patients in pain may wince at your touch, grimace, or briefly hold their breath. Patients who are confused or overwhelmed may rub their faces, pinch the bridge of their nose, or close their eyes. Depressed patients may slump in their chairs, frown, or have a blank stare.

Responding

Be aware of the message your nonverbal cues are sending. Your patients may be reacting to the feelings they get from you. Nonverbal cues should be friendly and professional. For instance, make eye contact to reassure a patient. It shows the patient you are listening. A lack of eye contact may make a patient feel worried or unimportant. Consider your facial expressions as well. You may frown or have a serious facial expression because you are tired, busy, or stressed. But the patient may interpret your expression in a personal way and become more worried.

Patients may be uncomfortable if you are standing over them while they are sitting or lying down. It is better to be at the same level if you can sit on a chair or stool while speaking. If you



FURTHER EXPLORATION...

ONLINE CONNECTION: Cues and Culture

Some nonverbal cues are a biological reaction. For example, a person's eyes may widen or jump when they are startled or surprised. Other nonverbal cues, however, may have different meanings based on a person's culture. It is not necessary, or even possible, to learn every cue given by people of every culture. It may be helpful, however, to learn some of the common differences. For the rest of the time, it is important for you to ask questions to verify the person's true feelings or intent.

Visit the following URL to learn more about some common nonverbal cues that differ among cultures. For example, the standards for eye contact vary greatly. Some cultures believe that making direct eye contact is disrespectful or overtly flirtatious. However, Americans generally believe that a lack of eye contact indicates disinterest or discomfort. If you are speaking to a Latino patient who avoids eye contact, you should use other cues to gauge his or her feelings. The patient could be showing you respect rather than indicating boredom or disinterest.

http://www.diversitycouncil.org/toolkit/Resources_TipSheet_NonverbalCrossCulturalCommunication.pdf

idget, speak in a rushed manner, or move toward the doorway while talking, the patient might feel that you are in a hurry. This may make the patient feel unimportant or uncomfortable.

Use your own verbal and nonverbal communication to address nonverbal cues of patients. Explain procedures and treatments in a calm voice to ease nervousness or confusion. Use active listening skills to make them feel understood. Also, ask additional questions to ensure you understand their nonverbal cues. A comforting touch, such as patting a patient's hand or shoulder, may calm some people. However, touch may make some patients more uncomfortable. If a patient withdraws or stiffens with your touch, avoid doing it again. If you must touch a patient as part of an exam, explain what you are going to do.

Sometimes nonverbal cues are a sign of a bigger problem that requires additional help. Notify your supervisor or a doctor if a patient's pain seems to increase or if the patient exhibits signs of depression or extreme confusion.



FIGURE 1. Some patients may be comforted by a friendly touch, but observe their nonverbal cues because touch makes some people uncomfortable.

Summary:



Communication is the exchange of information. It requires at least two people: a sender and a receiver. Verbal cues are spoken words that convey a message. Nonverbal cues are messages that do not include spoken words. Types of nonverbal cues include body language and paralanguage. You can improve communication by using the five C's of communication. It is important to recognize patients' nonverbal cues and to be aware of the message your own cues are sending. Use nonverbal communication to reassure patients or to improve the communication process, which may enhance patient care.

Checking Your Knowledge:



1. What are three barriers to verbal communication?
2. What are some examples of nonverbal cues?
3. What is active listening?
4. What percentage of communication is estimated to be nonverbal?
5. What nonverbal cues could a medical assistant use to put patients at ease?

Expanding Your Knowledge:



Look for examples of nonverbal cues in television shows or movies. Actors exaggerate their nonverbal cues and reactions to convey a message or feeling to the audience. What can you tell just by looking at their facial expressions? Practice using your own exaggerated facial expressions to communicate with others. Work with a partner, and try to guess the feeling behind each other's expressions.

Web Links:



Listening Skills

<http://www.kevinmd.com/blog/2012/01/good-communication-health-care-listening.html>

Nonverbal Communication

http://www.helpguide.org/mental/eq6_nonverbal_communication.htm

Nonverbal Cues

<http://www.entrepreneur.com/article/201202>

Examples of Nonverbal Communication

<http://examples.yourdictionary.com/examples-of-non-verbal-communication.html>