CHAPTER 3
Communication

How are these people communicating

Requirements for Communication

- Sender to a Receiver
- Two basic types of communication
- One-way communication:
  - The sender (caregiver) in control
  - Highly structured
  - Expecting and getting very little response
- Two-way communication: requires that both the sender and the receiver participate equally
Verbal communication

- Involves the use of spoken or written words
- Sharing of information takes place
- It is letting the other person know what you are thinking
- Then finding out what he or she thinks

Verbal communication

- Connotative: Individual perception or interpretation
- Denotative: Commonly accepted definition

Examples: “stool”, “void”, “funny”, “stable”, “fine”, “good”, others?

Role Play #1

- Pink
- 2 people
Nonverbal Communication

- Transmission of messages without the use of words
- Most common form of communication
  - Posture
  - Expressions
  - Gestures
  - Mannerisms

Universal language
Role play # 2
- Blue
- 3 people

Types of Nonverbal Communication

Active Listening
- Full attention and eye contact
- Withholding own comments, opinions and the need to talk
- Paraphrasing key words to encourage and let them know they've been heard
- Affirming through body language
- Paying attention to feelings behind words.

Eye Contact
- Eye contact: intention to interact
- Extended eye contact: aggression or induce anxiety
- Absence of eye contact: shyness, lack of confidence, disinterest, embarrassment, or hurt
- Eye contact for 2 to 6 seconds during interaction helps involve the other person
- Culture significantly affects how eye contact is interpreted
Physical Appearance

- Attributes
- Size
  - Color of skin
  - Dress
  - Grooming
  - Posture
  - Facial expression
- A professional appearance conveys pride and competence.

Role-play # 3
- Hot pink
- 1 person (Frank)

Types of Nonverbal Communication

- Physical Appearance
  - Gestures
    - Movements used to emphasize the idea being communicated
  - Posture
    - The way a person sits, stands, and moves
      - Open posture
        - Relaxed stance
      - Closed posture
        - Formal, distant stance

Nonverbal communication is very powerful.
If nonverbal cues are not consistent with the verbal message, it will most likely be the nonverbal message that is received.
Nonverbal communication

- Role Play # 4
- Blue
- 2 people

Styles of Communication

- **Manner** in which a message is communicated will greatly affect the mood and the overall outcome of an interaction
- **Assertive Communication**
  - Interaction that takes into account the feelings and needs of the patient, yet honors the caregivers rights as an individual
- **Aggressive Communication**
  - Interacting with another in an overpowering and forceful manner to meet one's own needs at the expense of others

Unassertive Communication

- Sacrifices the caregivers legitimate personal rights to meet the needs of the patient at the expense of feeling resentful

  “I don’t have the time right now, all right I will get you a pain pill now, but I have to get to the other clients sometime today”
Establishing a Therapeutic Relationship

- The caregiver demonstrates caring, sincerity, empathy, and trustworthiness.
- Trust is essential to effective nurse-patient interaction.
- The caregiver must be careful to maintain professional boundaries in nurse-patient relationship.

Tips for Building Rapport with Your Patient

- Become visible.
- Anticipate needs.
- Be reliable.
- Listen.
- Stay in control.
- Use self-disclosure.
- Treat each patient as an individual.
- Use humor when appropriate.
- Educate.
- Give the patient some control.
- Show support with small gestures.

Therapeutic

- An exchange of information that facilitates the formation of a positive nurse-patient relationship and actively involves the patient in all areas of their care.
- Deeper purpose for the conversation.
- Often you must first think about what to say before you say it.
Nontherapeutic

- Some caregivers treat patients like objects or things
- The caregiver acts arrogant, belittles, is uncaring and lacks warmth
- Prevents the patient from becoming a mutual partner in the relationship and may place the patient in a passive role

Communication Techniques

Nonverbal Therapeutic Communication

Listening
- Most effective methods but also most difficult
- Conveys interest and caring
- Active listening
  - Requires the caregivers full attention
- Passive listening
  - Caregiver attends nonverbally to what the patient is saying through eye contact and nodding, or verbally through encouraging phrases such as "Uh-huh" or "I see."

Silence
- Most underused
- Requires skill and timing
- Can convey respect, understanding, caring, support; often used with touch
- Gives you time to look at nonverbal responses
Touch

- Must be used with great discretion to fit into sociocultural norms and guidelines
- Can convey warmth, caring, support, and understanding
- Nature of the touch must be sincere and genuine
- If the caregiver is hesitant or reluctant to touch, it may be interpreted as rejection

Figure 3-1

Touch can communicate caring comfort.

Nonverbal Therapeutic Communication

- **Conveying Acceptance**
  - Patient may be reluctant to share information because he or she feels the caregiver may disapprove of the patient’s values, beliefs, or practices or may even fear rejection.
  - Acceptance is the willingness to listen and respond to what a patient is saying without passing judgment.
  - The caregiver must be careful not to nonverbally communicate disapproval through gestures or facial expressions.

Therapeutic Communication

- Role play #5
- Gold
- 2-3 people

Verbal Therapeutic Communication

- Closed questioning
  - Focuses and seeks a particular answer
- Open-ended question
  - Does not require a specific response and allows the patient to elaborate freely
- Restating
  - Caregiver repeats to the patient what the caregiver understands to be the main point
Verbal Therapeutic Communication

- **Paraphrasing**
  - Restating the patient’s message in the nurse’s own words to verify that the nurse’s interpretation is correct

- **Clarifying**
  - Restating the patient’s message in a manner that asks the patient to verify that the message received is accurate

- **Focusing**
  - Used when more specific information is needed to accurately understand the patient’s message

Verbal Therapeutic Communication

- **Reflecting**
  - Assists the patient to “reflect” on inner feelings and thoughts

- **Stating observation**
  - Validates the accuracy of observation

- **Offering information**
  - Nurse should make this interaction two-way

- **Summarizing**
  - Review of the main points covered in an interaction

Therapeutic communication

- **Role Plays # 5, 6 and 7**
  - **Gold**
    - 2-3 people each
Use of Humor

- “Laughter is the best medicine.”
- Laughter is a psychological and physical release.
- It can enhance feelings of well-being, reduce anxiety, and increase pain threshold.
- The use of humor can be effective and helpful, but it must be used with caution and discretion.
- Never appropriate to laugh at – only with – a person.

Figure 3-2


Factors Affecting Communication

- Posturing and Positioning
  - Where and how the caregiver sits or stands conveys a message to the patient.
  - The most therapeutic posture and positioning is for the caregiver to assume the same position and level as the patient.
Therapeutic Communication

- Role-plays 8 & 9
- Gold
- 2-3 people each

Space and Territoriality

- Comfort zone
  - Distance between two or more individuals that must be maintained to guard against personal threat or intimidation.
- Four personal space zones
  - Intimate zone: 0 – 18 inches
  - Personal zone: 18 inches - 4 feet
  - Social zone: 4 - 12 feet
  - Public zone: 12 feet or more

Environment

- Should provide a calm, relaxed atmosphere
- Level of Trust
  - Trusting relationship essential for effective nurse-patient interaction
- Language Barriers
  - Interpreter if available; messages must be kept simple
- Culture
  - Significant component of a patient's psychosocial well-being
Age and Gender

- A significant age difference between the caregiver and the patient may be a barrier to communication.

- Male and female patterns of communication are often related to cultural, familial, and lifestyle patterns.

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Role-play # 10

Green

2-3 people
Factors Affecting Communication

- **Physiologic Factors**
  - Patients may experience physiologic factors that can interfere with effective communication.
    - Pain
    - Altered cognition
    - Impaired hearing
    - Blindness

- **Psychosocial Factors**
  - Stress
  - Grieving

Blocks to Communication

- False reassurance
- Giving advice
- False assumptions
- Value judgments
- Clichés
- Defensiveness
- Asking for explanations
- Changing the subject

Communication in Special Situations

- **Ventilator-Dependent Patients**
  - Assess the patient’s ability to use a particular alternative method of communication
    - Communication board
    - “Signal system”
Aphasic Patients

- Expressive aphasia
  - The patient cannot send the desired message.
  - What is therapeutic response?
- Receptive aphasia
  - The patient cannot recognize or interpret the message being received.
  - What is therapeutic response?

Figure 3-4

Communication between a patient with a tracheostomy and the nurse requires patience.


Alternative Methods of Communication

- Lip reading
- Sign language
- Paper and pencil/magic slate
- Word or picture cards
- Magnetic boards with plastic letters
- Eye blinks
- Computer-assisted communication
- Clock face communicator
Unresponsive Patients

- Anyone interacting with the unresponsive patient should assume that all sound and verbal stimuli may be heard.
- Speak to the patient as if he or she were awake.
- Always explain to the patient any procedure or activity that is to take place involving the patient.

Examples of unresponsiveness

- Psychiatric Technician Students at this point in the lecture