



# NONVERBAL COMMUNICATIONS

**Lectures: 5 and 6**

**Course Name: Pharmaceutical Communication Skills**

**Course Code: 0520515**

**Lecturer: Dr Balakumar**

**Faculty Of Pharmacy,  
Philadelphia University-Jordan**

# Contents

- Overview
- Nonverbal versus Verbal Communication
- Elements of Nonverbal Communication
- Distracting Nonverbal Communication
- Detecting Nonverbal Cues in Others
- Dealing with Sensitive Issues
- Overcoming Distracting Nonverbal Factors

# *Overview*

- Words are not the only way by which pharmacists communicate.
- Interpersonal communication involves both verbal and nonverbal expression.
- **Words** normally express **ideas**, whereas **nonverbal** expressions convey **attitudes and emotions**.
- A large measure of how you relate to others and how they relate to you is not based on what is said, but on what is not said.

# *Overview (continued)*

- You may not speak or even have the desire to communicate, **and yet be engaged in a communication process.**
- You are constantly providing “messages” to those around you by your *dress, facial expression, body movements, and other aspects of your appearance and behavior.*
- Nonverbal expressions include kinesics, proxemics, and elements of the physical environment in which communication takes place.
- This chapter describes the various components of nonverbal communication and discusses how it plays an important role in effective patient-centered communication.

# Nonverbal versus Verbal Communication

- Nonverbal communication involves **a complete mix of behaviors, psychological responses, and environmental interactions** through which we consciously or unconsciously relate to another person.
- It differs from verbal communication in that **the medium of exchange is neither vocalized language nor the written word.**

# Nonverbal versus Verbal Communication (continued)

- The importance of nonverbal communication is underlined by the findings of behavioral scientists, who have reported that approximately **55% to 95% of all communication can be attributed to nonverbal sources.**
- Awareness and skilled use of your nonverbal abilities can **make the difference** between fulfilling, successful interpersonal relationships and frustrated, nonproductive interactions.

# Nonverbal communications are unique for three reasons:

- **First**, they **mirror** innermost thoughts and feelings. This mirror effect is constantly at work, whether or not you are conscious of it.
- **Second**, nonverbal communication is **difficult**, if not impossible, **to “fake”** during an interpersonal interaction.
- **Third**, your nonverbal communication **must be consistent with your verbal communication** or people will be **suspicious** of the intended meaning of your message. This lack of congruence between your verbal and nonverbal messages may result in less than successful interpersonal communication

# Cue ??

- In nonverbal communication, we perceive and interpret a given nonverbal message or “cue” in a personal manner.
- Various interpretations emerge from the different social, psychological, cultural, and other background variables of the senders and receivers of nonverbal messages.
- **Cue clusters are combinations of nonverbal acts that communicate certain global messages.**





# **ELEMENTS OF NONVERBAL COMMUNICATION**

# Important Elements of Nonverbal Communication

- Kinesics
- Proxemics
- Environment
- Distracting factors

# 1<sup>st</sup> : Key Components of Kinesics

- Varied **eye** contact (consistent, but not a stare)
- Relaxed **posture**
- Appropriate comfortable **gestures**
- Frontal **appearance** (shoulders square to other person)
- Slight **lean toward** the other person
- Erect body **position** (head up, shoulders back)

## 2<sup>nd</sup>: PROXEMICS

- Behavioral scientists have found that the quality of interactions can vary depending upon the **distances** between the communicators.
- In many cultures, people reserve the most protected space (within 18 inches from their bodies) for others with whom they have close, intimate relationships.
- When someone else ventures into this space during a conversation, people may experience anxiety and perhaps anger at the trespass of their intimate zone.
- **Most people in the United States tend to be more comfortable when a distance of 18 inches to 48 inches is maintained between other individuals.**

## 2<sup>nd</sup>: PROXEMICS (continued)

- Thus, you must consider the **distance factor** whenever you consult with patients.
- You want to stand close enough to ensure privacy, yet at the same time provide enough room so that the patient feels comfortable.
- You do not want to invade a patient's intimate zone nor conduct the counseling session in the public zone.
- Patients usually indicate nonverbally whether they feel comfortable with the distance by **either** stepping backward or leaning forward.

### **3<sup>rd</sup>: ENVIRONMENTAL NONVERBAL FACTORS**

#### **1- prescription counter:**

The counter and related shelving serve to keep the prescription dispensing process from the public's view. However, they can also serve as communication barriers if they inhibit your interaction with your patients.

#### **2- the presence of a private consulting area:**

May indicate to your patients that you are interested in counselling them in a private manner.

## **3<sup>rd</sup>: ENVIRONMENTAL NONVERBAL FACTORS (continued)**

### **3- The general appearance within the pharmacy setting:**

These messages influence patient perceptions about your professional role and your level of interest in serving your patients.

### **4- the physical characteristics of pharmacy employees:**

Professional staff should dress appropriately. You want to convey a friendly appearance, but you also want to convey professional competence.

## 4th : Distracting Nonverbal Communication

1- Lack of eye contact.

2- Facial expression

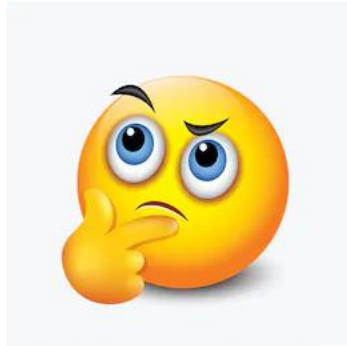
3- Body position

4- Tone of voice

→ Suggestion : record yourself during interactions with your patients (with their permission) to reveal possible inconsistencies.



***ANY SOLUTIONS?***



shutterstock.com • 1555790975

# DETECTING Nonverbal Cues in Others

- Assessing the meaning behind the nonverbal messages of others is difficult, because we tend to interpret nonverbal cues based on our **own personal backgrounds and experiences**. We “filter” these messages based on our personal orientation and experiences.
- The meaning of the nonverbal messages that we receive may or may not be the meanings intended by the sender.
- We need to **avoid making false assumptions or jumping to conclusions** based on inaccurate interpretations of nonverbal cues.
- It would be impossible to list all the potential situations where differences could arise

# **Dealing** with Sensitive Issues

- 1. Watch your patients**
- 2. Discuss sensitive issues with clarity and avoid potentially frightening scenarios**
- 3. Be cognizant of the potential for nonadherence**

# Overcoming Distracting Nonverbal Factors

1- Recognizing how you communicate with others. In the nonverbal area, this **self-awareness** involves being constantly aware of your nonverbal behavior.

→ videotaping yourself is particularly helpful, since it reveals the positive and negative aspects of your nonverbal communication.

2- **Finding strategies** to overcome these distracting elements.

→ One thing that should be mentioned here is that potentially distracting behaviors can be overcome by using nonverbal elements that project different messages.

→ The total message received by the patient is the combination of all these nonverbal cues, both positive and negative, and not just one isolated component.



# **CASE STUDY**

# Situation!!

- During his first externship experience in a community pharmacy, a pharmacy student (John) was assigned the task of receiving new prescriptions from patients. John wanted to help the patients and was looking forward to the opportunity of talking with them about their problems. One day, Mr. Stevens approached the prescription counter to have his prescription for levodopa refilled. John, who did not realize that Mr. Stevens had Parkinson's disease, noticed that his hands were shaking and commented, "I see you are a bit nervous today, Mr. Stevens. What's the matter?"

# Interpretation!

John observed a nonverbal message (rapid hand movement) from Mr. Stevens and assigned a wrong (and embarrassing) meaning to it.

John should not have jumped to the conclusion based on just one nonverbal cue but should have noticed that Mr. Stevens' head was also moving and that he walked with a shuffled gait characteristic of Parkinson's disease.



# SUMMARY



# Summary (1)

1. Certain nonverbal behaviors are **universal**; however, many are culturally specific.
2. Interpreting body language is ambiguous. Many people state that they can read a person like a book. However, assigning a particular meaning to a specific body movement **without checking the meaning** of that movement is **dangerous**. You could assign the wrong meaning to the nonverbal message.

# Summary (2)

3. Nonverbal behavior is **more powerful** than verbal. If the spoken word contradicts nonverbal behaviors, the observer will **believe** the nonverbal messages. Even simple advice, such as “Store this in the refrigerator and shake it well every time you use it,” may be influenced by your facial expression and tone of voice. If your tone conveys boredom and your manner is perfunctory, the advice may be seen as being of only minor importance.
4. The **physical attributes** of your practice environment have important effects on communication with patients. The location, design elements of the counselling area, employee appearance, and even the color scheme and signage on the walls all contribute to the messages that patients receive about your philosophy and attitude toward patient counseling.



THANK YOU