
UNIT 1 COMMUNICATION SKILLS : WHY ARE THEY IMPORTANT?

Structure

- 1.0 Objectives
- 1.1 Introduction
- 1.2 Can Communication Skills be Learnt
- 1.3 Basic Skills in Effective Communication
- 1.4 The Communication Continuum
- 1.5 Let Us Sum Up
- 1.6 Answers to Check Your Progress
- 1.7 Further Readings

1.0 OBJECTIVES

After studying this unit carefully you will be able to:

- list some of the purposes of communication in your profession;
- explain the process of communication;
- list the basic skills of communication in effective patient care; and
- explain about the communication continuum in your profession.

1.1 INTRODUCTION

You have joined a profession where you have to be in constant touch with people. You have to deal with patients, their attendants, visiting friends and relatives, senior nurses, doctors and colleagues from other departments of the hospital. This is besides the circle of your family and friends, your immediate neighbourhood and the society at large.

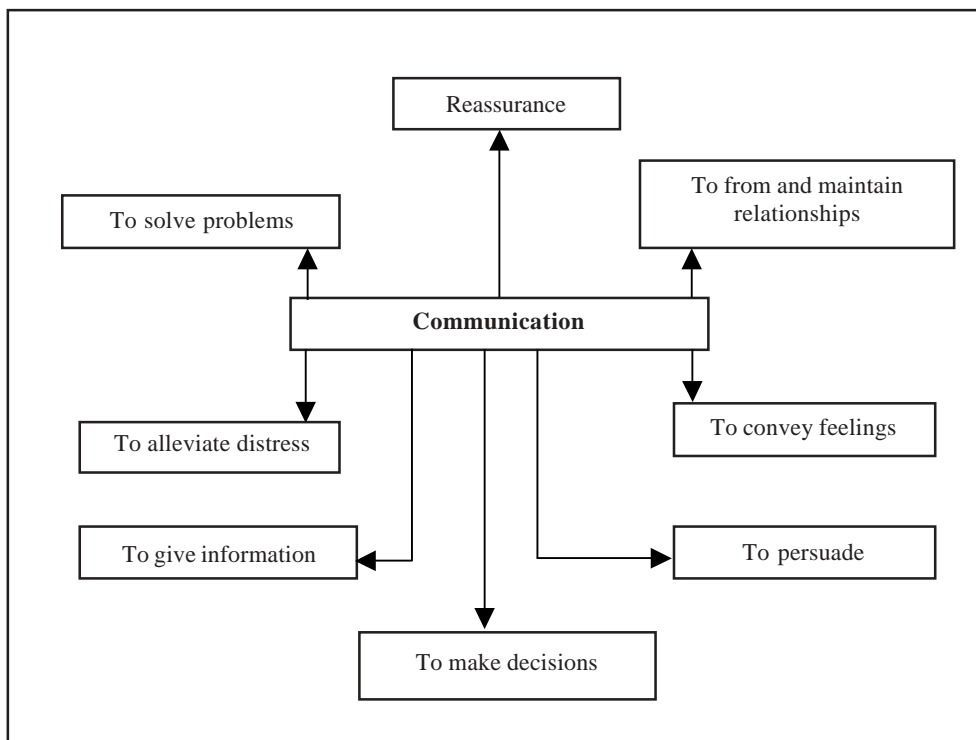
In this block we would concentrate on some of these situations which you would meet in your life — both professional and personal.

Before we proceed further, make a list of five people in the hospital you need to communicate with and the purpose thereof. One is given as an example.

- a) Senior nurses for necessary instructions, advice on patient care.
- b)
- c)
- d)
- e)

Now again look at the people and the purpose you have listed above. Would you talk and behave with everyone in the same manner? Obviously not. You would be formal with the senior nurses under whom you work, mostly talk about work and related activities, but with your peer group — i.e. other nurses who are studying and learning with you, your approach would be different and more informal. While with patients you have to deal in a sympathetic, friendly manner, sometimes you need to be polite but firm. In other words, the situation will decide the form of communication.

Given below is a diagram to show some purpose of communication in your profession.



Some Purposes of Communicating from *Communication Skills for Medicine* by Lloyd and Bor

However you should never forget that the ability to communicate well with patients — to build up a trusting relationship within which curing, comforting and reassuring/relieving can take place is a great challenge.

The Oxford English Dictionary tells us that the word ‘Communicate’ comes from Latin ‘to impart, to share’. ‘Communication’ is imparting, conveying or exchanging ideas, knowledge, etc.

A face to face conversation is not the only method of communicating. Can you suggest some more methods of communicating?

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Your answer should include some or all of the following:

- a) Writing a letter— snail mail or e-mail
- b) Telephone, Fax, Telegrams
- c) Newspapers, Books, Journals
- d) Media like Television, Radio
- e) Lectures, Presentations, Formal Teaching
- f) Talking to friends, Seniors, Peers, Patients, Doctors
- g) Interviews

In this block, however, we will concentrate more on communication skills as in face to face conversations, over the telephone, at an interview board or while presenting a paper. You

will study not only about different situations in a hospital but would also learn how to make enquiries at banks, railway stations and public places.

1.2 CAN COMMUNICATION SKILLS BE LEARNT

It was assumed until fairly recently that students acquire good communication skills and appropriate attitude by observing and modeling their behavior on that of their teachers. It is now recognised that the apprenticeship method is not sufficient and that formal training in communication skills is necessary.

Good communication can be learnt and improved. “It begins with good listening and a preparedness to acknowledge the ideas, ideals, and ethics of others, while at the same time considering the adaptation of one’s own to suit changing circumstances or because one has been shown that they are unacceptable to others.” Listening effectively is more than just hearing the words of others. It involves concentrating all our energy on understanding and interpreting the message with the meaning the sender intended. It is not at all necessary to use difficult words, phrases and terms to impress others. Rather it is how clearly we express our ideas and how simply we put forward our thoughts in which the essence of good communication lies. The most important point to realise is that you have the ability to communicate and that you use the ability continually while relating to other people. Learning communication skills is therefore different from learning to fix a bottle of IV fluid for a patient — which you might not have done before joining a nursing school.

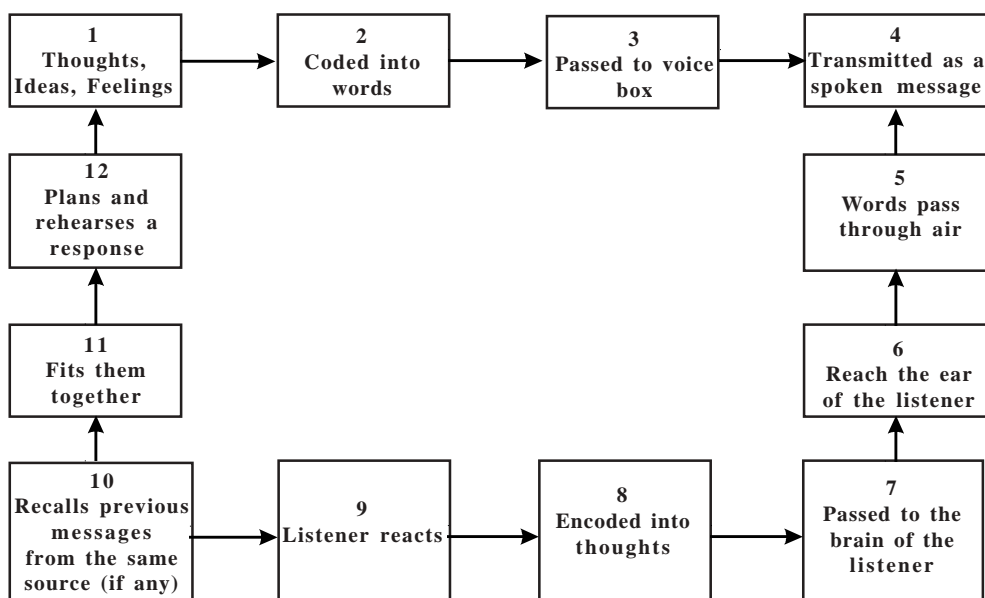
The communication skills course aims to polish your innate (own) skills and develop specific skills, which will enable you to communicate effectively with patients.

Check Your Progress 1

Put a (√) if the statement is correct and a (×) if it is not.

- a) The ability to listen is important to communicate properly. ()
- b) We should use often technical language to prove that we are professionals. ()
- c) We always talk to others for the same reasons. ()
- d) Communication skills cannot be learnt. ()
- e) Communication involves expressing your thoughts clearly. ()

Given below is a diagram on how communication occurs.



How Communication Occurs from *Communication Skills* by Barbara Scammell

Thus you can see that communication is a complicated process and there may be many points in verbal communication where there may be interference or breakdown.

Think of and list down five factors that may interfere with accurate verbal communication. One is done for you as an example.

- a) A person is emotionally disturbed and speaks incoherently.
- b)
- c)
- d)
- e)

Your list may include some or all of the following.

- a) The language used is not very well known to the speaker. In other words the language may be unfamiliar.
- b) The speaker cannot think clearly and hence the speech is muddled up.
- c) The speaker speaks very fast or very slow (and the listener cannot understand/loses interest).
- d) The listener misunderstands or misinterprets (accidentally or purposely) what is being said.

But if we are talking face to face, we have a better chance to observe the speaker, seek clarifications, ask for repetitions and despite interference retrieve a part or whole of the message on the basis of verbal/non-verbal cues.

1.3 BASIC SKILLS IN EFFECTIVE COMMUNICATION

We have mentioned before that the most important aspect in effective communication is the ability to listen carefully. Unless you listen attentively you will not be able to make an accurate, comprehensive diagnosis, detect emotional distress in patients or have patients who would agree with and follow the advise given.

Imagine your friend has come to talk of some problem, which she is recently experiencing. Apart from listening carefully, what else would you do to encourage her to continue to share all her story? Write them here.

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Yes, you would ask appropriate questions and help her continue if she is finding it difficult to express herself.

Listening, questioning and facilitating are three skills, which enable us to communicate effectively with others.

Questions can be either open or closed. Open questions allow the patient to tell their own story e.g. **Would you tell me what your problem is?** to which the patient may like to make a detailed response. *Closed* (i.e. specific) question usually elicits a yes or no answer. E.g. **Do you still have a bad throat?** [Yes/No].

By asking open questions you can get more relevant information in a given time, your patient would have the opportunity to express all his/her feelings. Open questions may also bring a lot of irrelevant information and take a lot of time. On the other hand, if the patient is shy or unwilling to talk, you have to ask a number of closed questions to elicit the case history.

While asking questions you must remember the following.

- a) Use open questions, particularly at the beginning when the patient is talking about his/her problems.
- b) Obtain relevant information by asking focussed/specific questions.
- c) Do not ask too many questions at once, this would confuse your patient.
- d) Give time to the patient to answer your questions.
- e) Make your questions simple and precise.

Facilitating communication is an essential part of effective listening: the aim is to help the patient talk as fully as possible. It can be verbal, e.g. you can say: Please tell me more about your pain. Where does it occur?

Facilitation can be non-verbal in the form of nodding your head at appropriate times, maintaining eye contact with your patient, etc.

Check Your Progress 2

Complete the statements with a word or a phrase.

- a) Communication skills can be..... and need to be.....
- b) To communicate effectively with patients you need to, and help the patient talk as fully as possible about his/her problem.
- c) We should be alert to/.....when a patient describes his/her problem(s).
- d) Our questions should not be or too at a time.

1.4 THE COMMUNICATION CONTINUUM

You have already read that you would need communication skills to:

- form and maintain relationships
- convey feelings
- give information
- alleviate distress
- persuade
- make decisions
- solve problems
- reassure patients under your care.

We can say that there is a form of communication continuum based in the use of social, interactive and counselling skills. Let us look at this table given below for the different stages and the skills and knowledge needed at these different stages.

Stage	Purpose	Skills and Knowledge needed
1. Primary Communication	Initial contacts	Simple interpersonal/social skills
		Ability to listen
		Patiently helping
		Ability to put people at ease
		Assertiveness
2. Secondary Communication	ongoing relationships	Use of interpersonal skills
		Knowledge of human behavior
		Ability to give and receive feedback
		Interviewing skills
3. Advice Giving	To teach, instruct, supervise	Use of interpersonal skills
		As in 1+2
		Knowledge of subject involved
4. Primary Counselling	To befriend those in need and anxiety	Interpersonal skills as in 1+2
		Ability to listen in a non judgmental manner
		Problem solving
5. Secondary Counselling	To give specific long-term help for drugs, alcohol, AIDS	Interpersonal skills as in 1,2,3+4
		Openness and preparedness to disclose and share

Adapted from **The Communications Continuum** from *Communication Skills* by Barbara Scammell.

“The art of talking to sick people and their relatives does not come naturally to most of us. It requires time, practice, a lot of self criticism and an ability to see oneself in the patient's predicament. And ...it also requires a broad knowledge of the world.” (Prof. Sir David Weatherall). But like we said before, communication skills can be learnt and improved. At the beginning, when you just enter your profession, you would mostly depend on the social and interpersonal skills needed for primary and secondary communications with patients, their attendants and relatives. But within a few years you would be called upon to advice and counsel patients and others from their family. So you have to prepare yourself for all these tasks by mastering the appropriate skills.

Check Your Progress 3

- a) Look at the table on communication continuum again. In which of the stages do you think you are working now?

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- b) Make a list of the skills you would need to develop for stages 2 and 3. (Also mention the skills that you think you already have.)

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1.5 LET US SUM UP

In this unit we made you aware of the following factors which are necessary for good communication in your profession:

- The ability to communicate well with patients — to build up a trusting relationship within which curing, relieving and comforting can take place.
- Questioning, listening and facilitating are three key skills which enable us to communicate effectively with others.
- There are different purposes/forms of communication in the nursing profession and each requires some specific skills.

1.6 ANSWERS TO CHECK YOUR PROGRESS

Check Your Progress 1

- a) ✓
- b) ×
- c) ×
- d) ×
- e) ✓

Check Your Progress 2

- a) learnt, practiced
- b) listen, question
- c) verbal/non-verbal cues
- d) too long/many

Check Your Progress 3

- a) Mostly primary and secondary
- b) Open-ended question

1.7 FURTHER READINGS

Lloyd, M. and Bor, R., *Communication Skills for Medicine*, Churchill Livingstone, 1996.

Scammel, B., *Communication Skills*, Macmillan Education Ltd., 1990.