

Non-verbal communication

Overview

Non-verbal communication can happen on a conscious or unconscious level, but generally people have less conscious control over this aspect as opposed to their control over what they say. Tone of voice, volume or pitch, facial expressions, eye contact, physiological changes (e.g. blinking more or sweating), gesticulating, stance, body position and movement (kinesics) are all forms of non-verbal communication. We transmit and absorb messages via non-verbal communication all the time, with some estimating that only around 30% or less of what we understand come from actual words (Skillsyouneed, 2017).

Making use of non-verbal signals is very relevant in a social care context. Used to good effect they can help:

- understand a person's emotional state
- corroborate, or contradict, what is being said or done
- gauge reactions or provide feedback on what is being said or done
- regulate or influence verbal communication
- foster trust and build relationships

Recognising emotions, thoughts and feelings, and being able to frame an appropriate response to these is key to good social work practice. Enabling the practitioner to gain a more detailed insight in to the individuals, families or groups they are working with and facilitating effective relationship-based practice.

In a social care context, the ability to recognise and interpret these different signals could be extremely valuable, for example, where perhaps there is an element of domestic violence or coercive control, or to support the involvement of a person who has cognitive impairment, difficulty communicating verbally or unable to communicate.

Do remember that everyone's non-verbal communication is slightly different, and therefore you shouldn't jump to conclusions. Nor should you take only one non-verbal signal as the definitive response, you need to consider all in the context of the conversation and what you know about the situation. Probe further by asking more questions some of which will be reflecting and seeking clarification.

What is also important, is to bear in mind that body language works both ways. As you are observing the body language of others they are observing yours - you are transmitting via your body language, and that this is a tool you can use to set a person at ease, build trust and rapport, impart confidence, manage group situations, diffuse conflict and so on.

Practice development exercise

1. Describe the ways in which body language might play a part in the following scenarios. Think about what non-verbal signals you might be looking for in the people likely to be involved, and what emotions, thoughts and feelings these might reflect. Then consider how you would wish to be communicating back in terms of your professional role e.g. building trust, rapport and having a positive influence on the situations and the outcomes of the person. What non-verbal signals might you utilise to respond to the situation, build relationships and corroborate what you are saying and doing?

- a) You visit an 89-year-old man currently in hospital awaiting discharge to home. He has COPD and is nearing end of life. You are meeting with him on the ward

at the hospital, and then with his wife and two daughters in an office just off the ward. Following this you attend the discharge meeting with the clinical staff.

- b) You are attending a multiagency safeguarding meeting to discuss a case where it is suspected that Susan, a 50-year-old woman with paraplegia, is experiencing controlling or coercive behaviour from her partner of 10 years, Joan. You have met with Susan to assess her needs whilst Joan was present, at one point during the assessment Joan leaves the room for around 15 minutes to take a phone call and make some tea.
- c) You are meeting with Fred and Maureen, a married couple in their 70's, Fred has Alzheimer's disease which has progressively affected his ability to communicate verbally. He is also experiencing mood and behaviour changes and can become frustrated, angry or aggressive.
- d) You are attending the review of John a 30-year-old man with a severe learning disability, his parents Hilary and Simon are present at all appointments. The previous assessment is very focussed on what Hilary and Simon want for John and doesn't seem to necessarily reflect John's views.

Relevant research, references and further reading

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