

## Improvement of Verbal and Nonverbal Communication Skills of Nursing Students through Self-Objectification

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### **Abstract**

*The purpose of this study was to investigate the effect of the self-objectification process through video watching on the interview process on the improvement of nursing students' verbal and nonverbal communication skills. The study method was an experimental study through the pre-post test of the control group. The subjects were 52 nursing students in C city. The results showed that the experimental group's linguistic and nonverbal communication skills were significantly improved before and after the experiment. These results suggest that an objective assessment of their interview process is an effective way to improve communication skills in nursing education.*

**Keywords:** *Communication, Ability, Skills, Standardized, Patient, Interview, Video, Analysis*

### **1. Introduction**

Recently, a consensus in nursing and medical communities has been that the most essential qualities required for medical personnel are effective communication and interview skills. Such consensus has led to the implementation of education on communication skills and medical conversation [1]. Education and training on communication are the processes that facilitate individuals' utilization of their perception system to form meanings among people involved in a conversation, to understand the mutual interactions with each other, and to use them without awkwardness [2]. Although training on nurse-patient communication should emphasize practice-based training that aims to understand interviews with patients, there needs to be more effort to reflect them in the curriculum effectively. According to a study, the communication skills of medical students who completed clinical practice improved overall. Still, their scores on active listening, expression of empathy, and understanding of the patient's point of view could have improved [3]. Such findings suggest that the current curriculum may need to improve medical students' communication skills with their patients more efficiently.

Acquiring self-objectification through observing oneself can help nursing students improve their communication skills with patients. One way to achieve self-objectification is to record oneself performing the task and watch the recorded video. This allows the comprehensive observation and evaluation of one's image and voice. The self-objectification method assumes that more information about oneself will improve one's behavior more [4]. Such a self-observation method aims to complement the traditional method of clinical practice centered

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on the instructor's verbal explanation and demonstration, and it has been used in fields such as sports dance counseling to correct and improve learners' movement by recording and watching learners' performance [5]. Communication skills are not just about the linguistic contents but also a comprehensive practice that includes broad non-verbal aspects such as emotional expression, the manner of speech, and empathetic attitude. Therefore, by observing oneself objectively, one can evaluate and improve the appropriateness of one's communication skills. The nursing department has tried to improve students' practical nursing skills, including communication skills, by adopting simulation training into the curriculum. Even though little research has been done on educational methods that could improve communication skills and nursing performance [6], the self-observation method is expected to be effective for the communication education of nursing students.

Therefore, this study aimed to examine the training method that could improve practical communication skills and to propose a method that could be implemented in the curriculum. Specifically, this study attempted to verify the effect of the self-objectification process, which makes the nursing students record their communication scene and evaluate their performance by themselves, on improving verbal and nonverbal communication skills.

## **2. Method**

### **2.1. Research method**

This study applied the randomized control group pretest-posttest design to verify the effect of the self-objectification process on the verbal and nonverbal communication skills of nursing students by recording the interview scenes with the standardized patients and evaluating their skills based on the recorded video.

### **2.2. Research procedure**

This study was conducted in the following procedures: development of a scenario, training of the standardized patients, development of a communication skill evaluation scale, pre-evaluation (recording and evaluation of the first interview), intervention on the experimental group (video watching and self-evaluation), and post evaluation (recording and evaluation of the second interview).

### **2.3. Evaluation tool for communication skill**

The communication skill evaluation tools for nursing assessment were based on the contents of the fundamental communication task suggested by the Kalamazoo consensus framework [7] and adopted the video interview evaluation tool developed by Kim [3], which is used for the video analysis of the medical student interview process. Some descriptions were revised to administer to nursing students. The evaluation tool consisted of 20 items evaluating verbal communication and eight items assessing nonverbal communication. The researcher evaluated the verbal communication items by analyzing the transcripts and the non-verbal communication items by watching recorded videos. Each item was assessed on three scales—performed, insufficient, and not performed—converted into 2, 1, and 0 points, respectively. The evaluation basis for each item was set based on relevant measures. The reliability of the instrument in this study was .81.

## 2.4. Data analysis

Analyses were conducted using SPSS 21.0 at the .05 significance level.  $\chi^2$  test and t-test were used to examine the general characteristics of the control and experimental groups and the homogeneity in communication skills. After the intervention, a t-test was conducted to compare the communication skills of the control and experimental groups. Lastly, pre- and post-communication skills in the experimental group were compared using a paired t-test.

## 2.5. Research ethics

This research was approved by S University Institutional Review Board (SMUIRB-AP-2016-004). The research objectives and procedures were explained to all participants, and those who agreed to the consent form were included in the study. It was informed that participation in this study would not affect the course grade. The recorded videos will be used for research purposes only and deleted shortly after the analyses, considering the ethical aspect of this study.

## 3. Result

### 3.1. Test for homogeneity

The test for homogeneity between the experimental group and the control group before the intervention showed no significant difference between the experimental group and the control group in terms of gender, age, and verbal and nonverbal communication skills.

Table 1. Homogeneity between the experimental and control groups (n=52)

Variables		Experimental group	Control group	t or $\chi^2$	p
		Frequency (%) or Mean( $\pm$ SD)	Frequency (%) or Mean( $\pm$ SD)		
Gender	Female	24(92.0%)	21(80.7%)	1.486	.223
	Male	2(8.0%)	5(19.3%)		
Age	Under 20yrs	15(58.0%)	11(42.0%)	1.256	.534
	21-22yrs	7(27.0%)	10(38.5%)		
	Above 23yrs	4(15.0%)	5(19.0%)		
Communication skill	Verbal	1.15( $\pm$ 0.35)	0.86( $\pm$ 0.19)	-1.137	.261
	Nonverbal	1.26( $\pm$ 0.40)	1.15( $\pm$ 0.35)	-1.057	.296

### 3.2. Differences in communication skills between the experimental group and control group after the intervention

Results regarding communication skill differences between the experimental and control groups after the intervention are shown in [Table 2].

There was a significant difference in the nonverbal communication skills between the experimental group (mean $\pm$ SD, 1.67 $\pm$ 0.26) and the control group (1.23  $\pm$ 0.46) after the intervention (t=4.28, p<.001). Verbal communication skills also showed significant differences between the experimental group (1.33 $\pm$ 0.28) and the control group (0.96 $\pm$ 0.27) after the intervention (t=4.84, p < .001). This indicates that self-objectification intervention improves both nonverbal and verbal communication skills.

Table 2. Communication skills after intervention (n=52)

Variables		Experimental group	Control Group	t	P (two-tailed)
		Mean±SD	Mean±SD		
Communication skill	Nonverbal	1.67±0.26	1.23±0.46	4.28	p<.001
	Verbal	1.33±0.28	0.96±0.27	4.84	p<.001

### 3.3. A comparison of pre-post score difference in communication skills

Results for pre- and post-communication skill score comparisons in the experimental and control groups are shown in [Table 3].

Table 3. A comparison of pre-post score difference (n=52)

Variables			The experimental group (n=26)			Control group (n=26)		
			Mean±SD	t	p	Mean±SD	T	P
skills	Nonverbal	Pre.	1.26±0.40	-5.676	p<.001	1.15±0.35	-.819	.420
		Post.	1.67±0.26			1.23±0.46		
		Difference	-0.40±0.36			-0.07±0.45		
	Verbal	Pre.	0.93±0.28	-8.700	p<.001	0.86±0.19	-2.298	.030
		Post.	1.33±0.28			0.96±0.27		
		Difference	-0.40±0.24			-0.11±0.23		

In the experimental group, there were significant differences in the pre-and post-scores in both nonverbal ( $t=-5.676$ ,  $p<.001$ ) and verbal ( $t=-8.700$ ,  $p<.001$ ) communication skills. Conversely, the control group showed no significant difference in nonverbal communication skills ( $t=-.819$ ,  $p=.420$ ) but showed a significant difference in verbal communication skills ( $t=-2.298$ ,  $p=.030$ ).

## 4. Discussion

Results of this study show that the nonverbal skills were significantly higher in the experimental group ( $1.67\pm0.26$ ) than in the control group ( $1.23\pm0.46$ ) after the intervention ( $p<.001$ ). Also, verbal skills were higher in the experimental group than in the control group ( $p<.001$ ). These results indicate that self-objectification intervention, which involves watching and evaluating one's own recorded performance, significantly improves communication skills.

This suggests that self-objectification involves recording and evaluating one's interview process and helps improve nonverbal and verbal communication skills. Verbal communication consists of having the intention to communicate with others, conveying thoughts, being able to speak about sensitive matters, talking about how one feels, and discussing and debating. Nonverbal communication involves reading emotions from facial expressions or gestures of the other person and communicating using eye contact and gestures. By watching a recorded video of themselves, the participants in the experimental group can have an opportunity to properly correct their behavior since they can see their facial expressions, emotions, and responses to patients' answers through the process of self-objectification. Such findings are consistent with those of O'Conner, Abert, and Thomas [8], who reported that recording and reviewing VTRs in scenes that mirror actual situations improves nursing intervention skills.

Regarding the pre-and post-intervention differences in communication skills between the experimental group and the control group, the control group did not show a significant change

in nonverbal skills before and after the intervention, but they showed significantly improved verbal skills after the intervention ( $p=.030$ ). In the experimental group, both nonverbal ( $p<.001$ ) and verbal ( $p<.001$ ) communication skills significantly increased.

The improvement of the verbal skills in the control group may be because of the class they took. In the class, between the pre-and post-intervention, the students performed three practices of interviews by taking the role of the patient and the nurse in turn beside the lecture, and such practices influenced the control group's communication skills. Choi et al., without using the self-objectification method, compared the improvement of communication skills between the experimental group who used standardized patients and the control group and reported that the experimental group showed significantly higher communication skills.

The health assessment practice training using standardized patients is thought to improve students' communication skills because it provides a similar situation to the actual scene than the current training model and allows students to use verbal and nonverbal communication. The self-observation method using video tapes has been widely used since it has various advantages. In recent years, videotape recording methods have been combined with self-assessment procedures to improve self-evaluation efficiency [5]. A study using the video recording method showed that this method leads to improvement in expressiveness in a short period. When students performed self-observation by watching their performance recorded in a video with an emphasis on expressiveness, they quickly recognized their problems in expressiveness. Through self-observation, students showed strong dissatisfaction with the lack of expressiveness in their performance, which led to a strong motivation to improve their problems. Also, watching the beautiful expressions of other students helped the students improve their expressiveness. Through several self-observations and subsequent performances, students showed much-improved performance regarding their expressiveness [5].

This study suggests that verbal communication skills can be improved through practice, but nonverbal skills are less likely to be enhanced from mere practice. Similarly, lecture-based theoretical teaching may have a positive effect on verbal communication skills. Still, continuous and repetitive training involving self-objectification and correction seems necessary for the nonverbal abilities to improve and become habitual.

Thus, using standardized patient in-patient interview training among nursing students is a very effective training method that provides a similar environment to the actual interview scene, thereby leading to changes in habitual behaviors. Verbal communication skills can be improved through theoretical lessons. Still, nonverbal communication skills can be effectively improved by implementing the self-objectification method, which involves seeing their performance directly and changing their behavior by having objective evaluation criteria. In conclusion, self-objectification is a very effective way to improve communication skills.

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