

Study shows racial differences in doctors' unspoken language

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(Medical Xpress) -- When communicating with white patients, black physicians may face greater challenges than their white counterparts, according to a University of South Carolina study.

Irena Stepanikova, an assistant sociology professor, found that <u>nonverbal</u> <u>communication</u> during medical visits is influenced by the race of the physician and the patient. The study, titled "Non-Verbal Communication Between Primary Care Physicians and Older <u>Patients</u>: How Does Race Matter?" is published in the *Journal of General Internal Medicine* (*JGIM*).

"African American physicians face many professional challenges, including discrimination, bias from employers and colleagues and white patients who question their authority," said Stepanikova. "The conflicted pattern of communication evident in this study may reflect these experiences."

Working from videotaped medical visits from 1998 -2000 from another study, Stepanikova analyzed nonverbal communication between primary care physicians and patients. She studied 30 primary care physicians and 209 patients, age 65 and older. While other studies have addressed the role of verbal communication and race in doctor-patient interaction, Stepanikova's study is the first to look at nonverbal communication and race in older patients.

Her findings are particularly relevant as society and the medical



profession become increasingly diverse.

Black physicians outperformed their white colleagues by using more positive nonverbal communication in their interactions with patients in general, she said. She also found black physicians' communication with black patients was overwhelmingly positive, but that their communication with white patients yielded a mix of positive and negative nonverbal behaviors.

"Black physicians used high degrees of smile, touch and open body position with black patients," Stepanikova said. "With white patients they had a high use of smile and gaze, but a low use of open body position. This conflicted pattern of communication may suggest a lack of social ease that is reminiscent of behavior between female doctors with male patients."

To conduct her study, Stepanikova, with the help of seven graduate students, digitized the videotapes, which were recorded in three different clinical settings in the Southeast and Midwest, and coded the nonverbal behaviors.

When coding nonverbal behaviors, she looked for specific positive cues, including open body position, eye contact, smile and touch. She said these cues convey involvement, availability, attention, warmth, encouragement, respect, understanding, empathy and affiliation, which she calls the building blocks of physician-patient relationships.

She said the findings underscore the need for further investigation by researchers to determine the impact that nonverbal communication, whether positive or negative, may have on the delivery of patient care and patient health outcomes.

This study, conducted in 2007 - 2011 and funded internally by the



university, builds on Stepanikova's research on racial disparities in physician patient communication and in their delivery of health care, which have appeared in numerous sociology and health care journals. This is the first time she specifically has looked at nonverbal behavior of physicians.

"I find nonverbal behavior especially interesting in the context of studies of race since it operates to a large degree non-consciously, and therefore it often reveals feelings and attitudes that people cannot or do not want to express in words," she said. "Because of the sensitive nature of racial attitudes, people may not feel free to fully disclose them verbally but may still reveal them in nonverbal communication."

More information:

www.springerlink.com/content/d84k724x813755g1/

Provided by University of South Carolina

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