

The importance of communication that keeps at its core emotional states: Evidence from the Middle East

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Authors

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Abstract

Evolution and changes in the modern day approach to medical care, and the impact of the Internet as an external source of patient information and tool for decision-making, have precipitated a significant shift in the doctor-patient relationship over the past 30 years.¹ This has translated into a move from a paternalistic, physician-dominated approach, reliant on “top-down” presentation of information, to a more patient-centred one, concerned with mutual participation and service users’ satisfaction.^{1,2} In the 21st century, medical and clinical decisions are determined by a shared decision-making process between the doctor and the patient.¹ Hence, the implications of the shift in

the doctor-patient relationship have been felt not only in the application of technical knowledge, but primarily, on how information is communicated to patients. The 21st century doctors face the challenge of having to present information in a way that maximises understanding and encourages collaboration. This has consequently precipitated a sudden and novel interest in doctor-patient communication skills in the literature.

Research suggests that physicians with poor communication skills are judged by patients to be inefficient doctors³ and that they are more liable to engage in malpractice.^{4,5} Hence, the assessment and teaching of communication skills has become a crucial element of medical schools’ learning process and medical educators are strongly encouraged to help students to develop patient-centered communication throughout medical school and via ongoing postgraduate workshops.^{6,7}

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Some researchers have argued that communication skills are not well taught as part of medical schools' curricula in the Middle East (ME),^{7,8} leaving physicians at different levels of training lacking crucial communication skills.⁹ Despite these claims and despite a growing interest in this topic,^{7,8,10} very little has been published on patients' satisfaction with physicians' communication skills in the ME, prompting some researchers to call for large scale studies.¹⁰

Effective communication is a complex skill that requires a combination of technical and social/interpersonal competence.⁴ The former relates to the more technical aspect of communication such as the explanation of procedures, side effects and diagnoses. The latter, instead, taps into the more social and interpersonal aspects of communication connected with non-verbal components such as empathy and respect, and connected with emotions such as compassion and kindness. Interestingly, when patients' complaints were analysed qualitatively, Kee, Khoo, Lim & Koh¹¹ discovered that perceived poor attitude, including perceived lack of respect and lack of empathy, was the most common and most reported complaint. Similar results were replicated in Saudi Arabia when a factor analysis of the Communication Assessment Tool-Team (CAT-T) questionnaire, used to assess doctors' communication skills, identified 4 main factors, including empathy and sensitivity, greeting and introductions, language and listening, as well as information sharing.⁹ Worryingly, the data of Al Nasser et al.⁹ reported a discrepancy between the physicians' insights of their communication skills and carers' perceptions, indicating the need for further studies and targeted training for professionals.

Answering calls from the region to assess clinicians' communication skills from a patient perspective, Al Hemiary et al.¹² investigated such skills in Iraqi physicians. Whilst other studies in the ME had previously addressed this issue,⁷⁻¹⁰ Al Hemiary et al.¹² is the first to differentiate between interpersonal and content-based communication, hence shedding more light on the complexity of verbal and non-verbal exchanges in the doctor-patient relationship. Findings highlight higher satisfaction rates for the former, suggesting that Iraqi physicians might be naturally inclined

to pay attention to interpersonal dynamics and communication that keeps emotional states at its core. In addition, the results suggest that in Iraq, patients' satisfaction rates of the clinicians' communication skills correlated with the physician's rank, length of service and duration of care.¹² These findings indirectly support the importance of the therapeutic alliance for patients' satisfaction and the utmost need to incorporate communication skills training as part of medical school's curricula in the ME, with a particular focus on the technical aspect of communication in Iraq.

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