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THE ETHICS OF COMMUNICATION WITH PATIENTS: A QUALITATIVE ANALYSIS OF TRANSPARENCY AND INFORMATION

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Abstract

Introduction: Effective communication between healthcare professionals and patients is an essential component of person-centred care and has a direct impact on the quality of care, patient experience, and health outcomes. This material addresses how the communication style of healthcare professionals and their perceptions of patients can influence patient engagement, satisfaction, and adherence to treatment. Patient-centred communication models significantly enhance healthcare professionals–patient interaction and contribute to improved physical and psychological outcomes. This is especially important in mental healthcare, where verbal communication is often the primary means of diagnosis and treatment, making the establishment of a shared understanding with the patient crucial.

Objective: This study explores the importance of effective communication between healthcare professionals and patients by exploring how communication styles and healthcare professionals’ perceptions influence patient engagement, satisfaction, and adherence to treatment, with the ultimate goal of enhancing health outcomes and promoting a person-centred approach, particularly in mental health care settings.

Methodology: This study employed the method of literature review as a qualitative approach to collect, analyze, and interpret existing data. Both national and international sources were examined, including scholarly articles, academic publications, institutional reports, and health policy documents. The aim of this methodology was to provide a clear theoretical and practical framework on the topic and to identify best practices and challenges within the relevant field. The selection of literature was purposeful, focusing on reliable and relevant sources aligned with the study’s objectives.

Conclusions: Effective communication between healthcare professionals and patients plays a fundamental role in improving the quality of care and health outcomes. The communication style and attitudes of healthcare professionals significantly influence patient engagement, satisfaction, and adherence to treatment. Emphasizing a person-centred approach strengthens the therapeutic alliance and is especially critical in mental health care, where communication is often the primary tool for both diagnosis and intervention. Investing in the development of communication competencies among healthcare professionals is essential to delivering compassionate, individualized, and effective care.

Keywords: *Effective communication, patient-centred care, healthcare professional perceptions, patient engagement, treatment adherence, mental health, healthcare professional – patient relationship.*

Introduction

In healthcare, communication relies fundamentally on interpersonal interaction. Interpersonal communication, considered the first spiritual tool in human socialization (Florescu C. et al., 2003), is defined by Floyd as communication between two people that helps negotiate and define their relationship over time (Floyd K., 2013). Abric (2002) describes it as a dynamic process of exchanging information and meaning within a social context, emphasizing that communication is not simply transmission but a mutual exchange, where both parties simultaneously act as sender and receiver. Ragnar and Blakar (1979) highlights the broadcaster's role as a creator who conveys personal views and social context through messages that elicit interpretation and reaction from the listener. Certo (2002) advises receivers to remain open, avoid negative communication behavior, and focus on the message's value rather than personal biases, noting that important ideas can be lost when communication is clouded by subjective feelings.

Communication between healthcare professionals and patients may seem intuitive. However, communicating effectively with patients while applying the principles of person-centred care can be challenging. Patients' perceptions of suboptimal care and healthcare services can be influenced by how healthcare professionals communicate with them, as communication serves both as a quality indicator and a reflection of patient experience. Effective communication is essential to optimize care. This involves understanding the theoretical principles of interpersonal and professional communication and applying practical methods of listening and speaking that nurses can use in clinical practice. (Price Bob, 2020).

Communication in healthcare environments is complex, multi-dimensional, and dynamic (Manary MP et al., 2013). The style and quality of communication between healthcare professionals and patients can significantly impact patient satisfaction (Hall JA et al., 1988), adherence to treatment plans, 30-day hospital readmission rates, information recall, emotional health, and overall health outcomes (Doyle C et al., 2013). While verbal communication strategies have historically received the most attention, nonverbal communication is increasingly recognized as a critical component in delivering high-quality patient care and is essential to the patient-clinician relationship (Finset A, 2007). Effective nonverbal communication is associated with improved patient satisfaction, trust, confidence, lower malpractice litigation rates, better adherence, symptom resolution, and positive health outcomes (Beck RS et al., 2002).

In healthcare, effective communication is essential for delivering high-quality services and ensuring a positive experience for patients. This study explores the role of ethics in doctor- patient communication and the management of sensitive and stressful situations within the healthcare environment.

Medical health are often required to make quick and accurate decisions, which frequently necessitate sensitive and ethical communication, especially in urgent situations, when health complications arise, or when patients face serious diagnoses. (Ngjela J et al, 2025)

From the choice of attire to facial expressions to gestures, nonverbal communication is defined as behaviors that carry no linguistic content (Knapp ML, Hall JA, 2002). Nonverbal communication can be an important vehicle for demonstrating compassion and has been described as "the channel most responsible for communicating attitudes, emotions, and effect" (Verderber RF, Verderber KS, 1980). It also conveys much about interpersonal interactions and the status between two individuals. Nonverbal communication can clarify verbal messages, modulate interactions, and convey attitudes such as support and interest in others (Duggan P, Parrott L, 2001).

The quality of care a patient receives partly depends on the physician's communication skills. Healthcare professionals who are informative, show support and respect for the patients, and facilitate patients' participation in care generally have patients who are more satisfied, more committed to treatment regimens, and experience better health following the consultation (Jahng, Martin, Golin, & DiMatteo, 2005; Trummer, Mueller, Nowak, Stidl, & Pelikan, 2006). Quality of care can also be affected by healthcare professionals' perceptions of their patients. For example, healthcare professionals' liking for their patients has been associated with higher ratings of patient satisfaction with care and more positive evaluations of the

healthcare professional's behavior (Hall, Horgan, Stein, & Roter, 2002). Furthermore, healthcare professionals' communication and perceptions of patients seem to be interconnected. Healthcare professionals provide more information, express more empathy, and show more positive effect toward patients they respect and view favorably (Beach, Roter, Wang, Duggan, & Cooper, 2006; Levinson & Roter, 1995).

Importance of communication in healthcare

The patient's communication style can have a significant impact on healthcare professionals' behavior and beliefs. Like other forms of social interaction, the medical encounter requires participants to cooperate and coordinate their communication. Therefore, any individual involved can exert considerable influence over the other. For example, healthcare professionals tend to be more informative, accommodating, and supportive when patients ask questions, make requests, offer opinions, and express their fears and concerns (Gordon, Street, Sharf, & Soucek, 2006). Healthcare professionals are generally more responsive to actively engaged patients, partly because they have a better understanding of the patient's needs and concerns, and partly due to conversational norms (e.g., 'answers' should follow 'questions', and utterances should be thematically connected).

It should be considered that communication within the medical system occurs in a complex environment, where both favorable and unfavorable factors coexist and continuously shift in importance. In medicine, communication takes many forms and can be seen in various situations, with the most important being the interaction between healthcare professional and patient provides much of the data necessary for establishing a diagnosis. Interpersonal communication arises through the combination of verbal forms (spoken and written language), nonverbal forms (gestures, facial expressions, posture, movement, appearance), and paraverbal forms (voice attributes accompanying speech, such as intonation, voice inflection, tone, rhythm, and verbal flow). Communication can be influenced by a number of factors (Radu I, et al, 1994): - the degree of closeness or spatial proximity; - the limits and extent of physical contact in these relationships; - the friendly or authoritative style of communication; - the exchange of glances that form visual communication; - the volume and pace of interactions; - the dynamics of reciprocal self-development.

Considering the importance of the informational content of patient-healthcare professional communication (the diagnostic process, treatment), emphasis is placed more on verbal communication in the medical system. Non-verbal and paraverbal forms are significant from the perspective of their emotional impact, as well as the reliable foundation and empathy that must exist between the two parties, with these forms being devoid of semantic and logical values.

In the medical field, communication is a fundamental clinical skill that involves establishing the therapeutic relationship, understanding the patient's perspective, exploring thoughts and emotions, and guiding them toward improving their health. The quality of the information gathered by the healthcare professionals during consultations is closely linked to the communication skills of both the healthcare professional and the patient. The literature mentions that a healthcare professionals' ability to listen, explain, and empathize can profoundly impact the patient's health status and functioning, as well as their satisfaction with healthcare professionals in the medical setting. (Brock D., 2013).

In communication with the patient, listening and time (availability) are essential elements that must capture the speaker's attention, regardless of their emotional state or cognitive processing mode. "Knowing how to listen" is the first rule of dialogue (Athanasiu A., 1998). Several conditions must be met for listening to be effective and beneficial for healthcare professionals. It must be active, comprehensive, empathic, receptive, and critically engaged. First, listening must be active, which involves not only mental participation (attention and concentration) but also physical engagement. For example, an overly relaxed posture can hinder memory and comprehension, while relatively uncomfortable positions create a vigilant state that is conducive to effective listening.

The meaning of communication in treatment

The meaning of treatment is, to a large extent, shaped by the healthcare professional–patient relationship. A better healthcare professional–patient relationship is associated with better outcomes, such as improved treatment adherence, higher patient satisfaction, and fewer patient litigations (*Levinson, Roter, Mullooly, Dull, & Frankel, 1997*). A meta-analysis found that the likelihood of having adherent patients was twice as high if doctors were good communicators (*Zolnierek & Dimatteo, 2009*). The healthcare professional–patient relationship is also linked to improved physical health outcomes (*Kaplan, Greenfield, & Ware, 1989*) and psychological outcomes in both physical (*Fallowfield et al., 2002*) and psychological illnesses (*Tattan & Tarrier, 2000*).

The healthcare–patient relationship is, at least in part, constructed through healthcare professionals–patient communication. Communication is the means by which a patient’s symptoms are elicited, a diagnosis is delivered, and treatment is recommended and monitored. This applies across all areas of medicine. However, it is perhaps even more critical in mental health care than in physical health care because most mental health conditions are diagnosed and treated without the aid of physical tests or investigations (blood tests, x-rays, imaging, surgery, etc.). For the most part, words are used exclusively to diagnose mental illness, and in many cases, words are the primary method used to treat psychological conditions, such as in counseling and psychotherapy as is the case in counseling and psychotherapy.

Approaches to the study of healthcare professionals–patient communication

The most widely supported and adopted model of communication in medicine is the patient-centered approach. Patient-centered care aims to shift the focus away from disease alone and personalize care according to the patient’s concerns and preferences, taking into account the biological, psychological, and social aspects of illness. There are various methods for measuring patient-centeredness, which typically involve predefined coding systems to categorize healthcare professional communication (*Mead & Bower, 2000*). These coding systems generally focus on the behavior of healthcare professionals, often paying less attention to the behavior of the patient (*e.g., Brown, Stewart, & Ryan, 2001*).

There is a substantial body of empirical research on patient-centered care that has significantly contributed to the development of the field of healthcare professionals–patient communication and its relationship with patient health outcomes (*Roter & Hall, 2006*). Although there are variations across different patient groups and clinical outcomes, there is strong evidence that patient-centered communication improves patient satisfaction and self-management of illness (*Rathert, Wyrwich, & Boren, 2013*). Recent studies have emphasized the need for more detailed mapping of the specific processes within doctor–patient communication that mediate various outcomes, including both short-term (*e.g., therapeutic relationship, patient satisfaction, and treatment adherence*) and long-term outcomes (*e.g., symptom burden, hospital admissions, and use of other healthcare services*).

In an influential approach to operationalizing patient-centeredness, (*Epstein and Street, 2007*) proposed that one of the core domains of patient-centered communication is achieving a shared understanding of the patient’s problems and treatment, aligned with the patient’s values. However, with a few exceptions that address the role of misunderstandings—for example, the potential or actual negative consequences of medication use (*Britten, Stevenson, Barry, Barber, & Bradley, 2000*) and cross-cultural miscommunication contributing to increased disease burden among ethnic minority groups (*Kagawa-Singer & Kassim-Lakha, 2003*)—relatively little emphasis has been placed on the role of miscommunication in healthcare professional – patient interactions.

Effective healthcare professionals - patients communication

A healthcare professionals’ communication and interpersonal skills include the ability to gather information to facilitate accurate diagnosis, provide appropriate counseling, deliver therapeutic instructions, and

establish compassionate, trusting relationships with patients (Duffy F.D. et al., 2004). These are core clinical competencies in the practice of medicine, with the ultimate goal of achieving optimal health outcomes and patient satisfaction—both of which are essential for the effective delivery of healthcare (Brinkman W.B. et al., 2007).

Basic communication skills alone are not sufficient to create and sustain a successful therapeutic healthcare professional–patient relationship. Such a relationship is built on shared understanding and emotions concerning the nature of the illness, treatment goals, and psychosocial support (Arora N., 2003). Interpersonal skills build upon these foundational communication abilities. Effective communication integrates both patient-centered and healthcare professionals-centered approaches (Brédart A. et al., 2005).

Effective healthcare professionals–patient communication is a central clinical function and lies at the heart of medical practice, playing a crucial role in the delivery of healthcare (Stewart M. A., 1995). The three primary goals of current healthcare professionals–patient communication are to create a strong interpersonal relationship, facilitate the exchange of information, and involve patients in decision-making (Lee S. J., et al., 2002). Effective communication between healthcare professionals and patients is determined by the provider’s “bedside manner,” which patients often use as a major indicator of their healthcare provider’s overall competence.

Good healthcare professional–patient communication has the potential to regulate patients’ emotions, facilitate their understanding of medical information, and enhance the identification of their needs, perceptions, and expectations (Platt F. W., Keating K. N., 2007). Patients who report good communication with their healthcare professionals are more likely to be satisfied with their care, share pertinent information for accurate diagnosis, follow medical advice, and adhere to prescribed treatments (Harmon G., et al., 2006). Additionally, patients’ agreement with healthcare professionals about the nature of treatment and the need for follow-up is strongly associated with their recovery.

Conclusion

Effective communication between healthcare professionals and patients is a crucial element in delivering high-quality care. It plays a significant role in building therapeutic relationships, enhancing patient satisfaction, and improving both emotional well-being and clinical outcomes. Improving communication skills in medical practice, both verbal and non-verbal, should be prioritized through education, empathy-based training, and patient-centered approaches. Promoting open, respectful, and emotionally intelligent dialogue leads to more accurate diagnoses, better treatment adherence, and increased patient safety, ultimately contributing to a more effective and humane healthcare system.

Discussion

- The analysis of the materials highlights that interpersonal communication in healthcare professionals extends beyond simple information exchange; it is a dynamic process that significantly shapes the therapeutic relationship. When communication is effective, it fosters trust and encourages patients to express their concerns openly, thereby enhancing diagnostic accuracy. Conversely, poor communication can result in misunderstandings, emotional discomfort, and even medical errors. Research indicates that clinicians who actively listen and involve patients in decision-making tend to achieve better treatment outcomes and report higher levels of patient satisfaction.

- While verbal communication remains a core component of clinical interactions, nonverbal and paraverbal elements also play a crucial role in shaping the emotional tone of these encounters. Aspects such as eye contact, body language, tone of voice, and facial expressions can either reinforce or undermine spoken words. For instance, a hurried or distracted demeanor may leave the patient feeling unimportant,

even if the verbal message is reassuring. Therefore, training in nonverbal communication should be systematically incorporated into medical education to strengthen overall communication competence.

- The materials also emphasize that patient involvement in communication plays a significant role in the quality of care and the behavior of healthcare professionals. When patients ask questions and voice their concerns, doctors are more likely to offer detailed explanations and emotional support. This dynamic indicates that empowering patients to actively participate is crucial. Educating patients about their role in communication could increase their engagement and improve treatment outcomes. Furthermore, recognizing patient preferences, values, and emotions fosters a shared decision-making process, aligning with the principles of patient-centered care.

- Another key issue identified is the impact of physician attitudes and biases on communication quality. Studies suggest that doctors communicate more empathetically and effectively with patients they respect or like, which could unintentionally lead to unequal treatment. This raises concerns about fairness and highlights the need for greater awareness of implicit biases in healthcare settings. Addressing this challenge requires cultural sensitivity training and reflective practices to ensure equitable and compassionate care for all patients.

- Another point raised is the need for systemic support for communication development within healthcare institutions. While individual efforts are important, organizational policies and leadership attitudes have a substantial influence on communication culture. Healthcare leaders should encourage communication improvement through structured feedback, mentoring, and designated time for patient interaction. Supportive environments provide healthcare professionals with the opportunity to practice clear and empathetic communication without the pressure of rushed consultations.

Conclusion

In summary, improving healthcare professionals-patient communication is essential to ensuring high-quality, empathetic, and safe healthcare delivery. The process involves not only enhancing individual skills but also transforming institutional culture and policies to support patient-centered interactions. Both patients and healthcare professionals must be empowered to engage in honest, respectful, and empathetic dialogue. Investing in communication is not merely a soft skill initiative—it is a core clinical competency with direct impact on health outcomes and the integrity of medical practice.

Recommendations

Improving education on clinical communication

In-depth training on verbal and non-verbal communication should be integrated into the curricula and ongoing training of healthcare professionals.

Developing patient-centered communication

Training in nonverbal communication should be systematically incorporated into medical education. Healthcare professionals should use clear and understandable language.

Training staff in active listening and empathy skills

Active, full, and emotionally involved (empathetic) listening should be promoted as a fundamental part of every consultation.

Unnecessary interruptions should be avoided, and space should be created for the patient to express their concerns.

Evaluating the importance of communication as part of service quality

Healthcare institutions should use patient surveys and feedback collected through structured interviews to assess the communication experience with staff.

Training in nonverbal communication should be systematically incorporated into medical education.

Using effective communication to reduce misunderstandings and medical errors

Clear and accurately documented communication helps avoid misinterpretations related to diagnosis, treatment, and post-treatment instructions.

Effective interdisciplinary communication among medical team members should be promoted.

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