Health Communication Research for Nursing Science and Practice

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Communication is at the heart of any human relationship. We use communication to construct messages and meaning about our experiences, from the mundane thoughts and activities of our everyday lives to the profound events of our lifetimes. Health and illness affect quality of life, making health communication critical because the stakes are high. Yet, the intimate and sometimes overwhelming nature of health concerns can make communicating with nurses and other healthcare providers very challenging.

The belief that patient-centered communication is fundamental to ensuring optimal health outcomes reflects long-held values in nursing for individualizing care and being responsive to patient health concerns. Today, as communication increasingly involves device-mediated encounters as well as face-to-face interactions, research that explores and clarifies the who, with nurses and other healthcare providers very challenging. The overwhelming nature of health concerns can make communicating the stakes are high. Yet, the intimate and sometimes over-

Communicating wellness, self-management for improving quality of life in individuals with chronic illness, and end-of-life and palliative care (National Institute of Nursing Research [NINR], 2011)—the need for health communication research is great. Nursing scientists should incorporate communication-related questions into their research programs to facilitate relevance of their work to practice, to leverage the impact of their work, and to contribute to the advancement of health communication research.

In this issue of Nursing Research, a detailed analysis of the conversation sequences generated during the health history-taking portion of consultations at an ambulatory health center was reported (Vickers, Lindfelt, & Dodd-Butera, 2016). Transcripts of dialogue between monolingual Spanish-speaking patients with chronic health concerns interacting with bilingual nurses and nurse practitioners were studied. Information obtained at intake by the clinic nurse was sometimes repeated later during consultation with the nurse practitioner. This observed redundancy was sometimes shown to be inefficient, but the conversation analysis also revealed that repetition sometimes resulted in different co-constructions of meaning by different providers and could facilitate seamless teamwork. Reading the conversation excerpts is eye opening as the second-to-second communications unfold and punctuate the individualized nature of every nurse-patient interaction.

Other recent articles in Nursing Research also address aspects of health communication for nursing. Individualization of communication with youth seeking clinical care may be facilitated by actively engaging them in health assessment through completion of an event history calendar or completion of a questionnaire about adolescent health risks; in a secondary analysis of data from a randomized clinical trial, communications outcomes improved from pretest to posttest after use of both methods for structuring interactions (Martyn et al., 2013). Conversation transcripts were also studied during clinic consultations with persons about self-management of type 2 diabetes; nurses’ use of jargon and failure to close communication loops related to understanding of information were common (Al Sayah, Williams, Pederson, Majumdar, & Johnson, 2014). The Communication Interaction Behavior Instrument (Nilsen et al., 2014) was developed to enable study of interactions between nurses and older adults whose communication abilities are diminished by mechanical ventilation during critical care. As a group, the articles point out the wide range of settings and situations in which communication between nurses and patients occurs, the benefits accruing from effective communication, and the negative aftereffects when communications go awry.

As its name implies, health communication is a hybrid area of research at the intersection of the health sciences and communication science. Within the field, challenges arise from tensions associated with scientific versus practical emphasis in research, differences in the traditions and scholarly cultures of the parent disciplines, and the need to extend the field from local to global, international, intercultural perspectives (Hannawa et al., 2014). The complementary foci of the health sciences and communication science create a natural setup for effective team science. At the intersection, a value for theory in health communication science (Hannawa et al., 2014) and nursing science alike creates a shared foundation for collaborative efforts. The individual, interaction, and relationship-focused theories used to study interpersonal communication (Bylund, Peterson, & Cameron, 2012) have similarities in structure and overlap in concepts with theory used in nursing. Likewise, the goal of understanding how communication effects positive changes in health and health behavior is shared (Street, Makoul, Arora, & Epstein, 2009; cf. Donaldson & Crowley, 1978: “… the processes by which positive changes in health status are effected…”). The vast practice experiences
of nurses as the backbone of health services across the world bring credibility and trustworthiness of knowledge about provider–patient encounters as interpersonal health communication to the scientific table. Challenges linking theory and practice in health communications (Ruben, 2016) could be mitigated with increased engagement of nursing scientists in research endeavor.

Palliative care for children living with serious illness and their families is fraught with communications challenges. Conversation matters in this poignant situation (NINR, 2016), which highlights the pressing need for translation of findings from nursing communications research to practice. Because students find this aspect of practice to be difficult, a first step is to ensure that instructional programs at all levels are continuously updated with new findings from nursing and health communication research studies. A second step is to deliberately incorporate communications protocols into practice. Broad societal issues should be addressed using policy.

The individuals, families, communities, and mass audiences communicating with health professionals need and deserve thoughtful, responsive, effective communication experiences with health professionals. Health communication research for nursing science and nursing practice will help to ensure they receive it.

Susan J. Henly, PhD, RN, FAAN, is Editor of Nursing Research.

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