

Importance of Effective Communication in Healthcare Settings: Students' Perspectives

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Abstract

Communication can make or break the bonding between healthcare professionals and their clients. Dealing with the theme of communication in healthcare settings specific to the educational institutions, this paper aims at:

- a) Emphasizing the importance of effective communication for the Healthcare Professionals working in the Medical Centers within a college premises;
and
- b) Understanding various factors involved in the communication process between students and healthcare professionals through an empirical investigation.

The college premises chosen for this study is BITS Pilani, KK Birla Goa Campus, Goa, India. About 500 students of the campus were asked to respond to a questionnaire consisting of 10 questions related to various factors involved in healthcare communication. An analysis of the responses received from 155 students and the inferences drawn from this analysis have been presented in this paper.

Importance of Communication in Healthcare Settings

Given below is an excerpt from the conversation between a doctor and a patient:

Doctor: Breathe deeply.

Patient: I'm not comfortable Doctor.

Doctor: Are you the doctor or am I? Do what I ask you to do.

Theodore Roosevelt once said, "Nobody cares how much you know, until they know how much you care." We can easily understand that the communication quoted above between the doctor and the patient is not the sort that patients expect from their doctors. They wish their doctors not only to be good in their diagnosis but also to be compassionate and understanding and of course doctors can fulfill their patients' wish if they communicate effectively.

Communication is an act of the transmission and interchange of ideas, facts, feelings and courses of action and involves sharing of various kinds of information, decisions, problems, solutions, etc. (Wood, 2011). It is used for expressing likes and dislikes, affection and hatred, affluence and penury, agitation and composure, arrogance and submissiveness, appreciation and sarcasm and many other such

emotional expressions. According to Garcia (2012), “Effective communication is an act of will directed toward a living entity that reacts. That reaction is the essential element of effective communication.” For instance, when patients communicate with their doctors, the reaction of the doctors plays a crucial role in the communication effectiveness. In fact, effective communicators know that they need to adapt if they are not being understood. They need to adapt based on the changes in the environment in which communication is taking place; as facts become outdated or as new developments require attention. Maxwell (2010) says that everyone communicates but only few connect and that connecting is the ability to identify with people and relate to them in a way that increases our influence with them. In addition, both senders and recipients need to be assertive in their collaboration to make a communication effective and there needs to be motivation on both sides to make the communication work (Hugman, 2009). Whatever may be the type of communication—intrapersonal, interpersonal, group, mass—the basic principles that involve an active collaboration and connection between the senders and the receivers remain the same.

According to Northouse (1998), health communication refers specifically to transactions between participants in health care about health-related issues and the three major factors of the health communication process are: relationships, transactions, and contexts. In organizational contexts health communication may be involved with areas such as hospital administration, staff relations and organizational communication climates. Miller and King (2015) emphasize the importance of a common language, seeing everyone as a potential communicator and engaging people who use services for better integrated care. Effective communications improve processes, relationships and outcomes of all sorts including preventing patient complaints. Healthcare Professionals (HCPs) operate within all branches of healthcare: medicine, surgery, nursing, administration, pharmacy, pathology, etc. HCPs in the 21st century should not only possess the clinical skills necessary to providing patient care but also master the communication skills essential to ensuring positive health outcomes for patients (Mc Corry, 2011).

“Physicians who appear to exhibit more emotionally expressive nonverbal behaviors—including facial expressiveness, eye contact, head nods, body posture, and voice tone—are generally viewed more favorably by patients. These behaviors, in turn, are linked to a variety of patient outcomes, including patient satisfaction, health services utilization and appointment keeping, and functional status” (Roter et al., 2006). Unlike many other professional settings that give more importance to verbal communication than the nonverbal, the Healthcare Professionals (HCPs) need to give at least equal importance to verbal and nonverbal means of communication for their professional success. The term HCPs include doctors, nurses, paramedical staff, hospital managers, etc. The importance of effective communication in Healthcare Settings can’t be ignored. In fact, it may not be an exaggeration to say that communication is the lifeline of all business organizations involving healthcare activities.

Therapeutic refers to the science and art of healing (Miller & Keane, 1972); of or pertaining to a treatment or beneficial act (Potter & Perry, 1992). This can be further extended to include what Rogers (1961) calls the helping relationship, which is one that promotes growth and development and improved coping with life for the other person. Therapeutic communication involves the interpersonal communication between the sender and the receiver. However, it is not merely the general interpersonal interaction which is used for building relationships, exchange of ideas, etc. It requires delicate and numerous skills as compared to the type of interpersonal communication used in organizational contexts. Healthcare professionals such as doctors and nurses use therapeutic communication to influence or help their patients to a better understanding through verbal and nonverbal communication. They use this face-to-face communication that focuses on enhancing the

physical and emotional well-being of their patients. It involves the use of specific strategies that encourage their patients to express their feelings and ideas and that convey respect and acceptance (Krieger 1975). It is an interaction between a healthcare professional and a patient and aims to enhance the patient's comfort, safety, trust, or health and well-being. It satisfies humans' basic need to express and to be heard and understood. Therapeutic communication is ubiquitous but it is more prominent and much needed in the healthcare settings than in any other situations.

HCPs are expected to communicate with their patients and their relatives, peers, superiors and subordinates on an everyday basis. They use both verbal and nonverbal means of communication. If we consider a college which houses students of the age group 20 to 26, it needs to provide adequate medical facilities including doctors and paramedical staff. These HCPs are approached every single day by the students for their ailments and related treatment. It may not be incorrect to say that communication is the key to various factors pertaining to understanding the complaints, asking questions to elicit information from the complainants, displaying empathy, explaining the details of diagnosis, etc. So, it is clear that at every step of interaction between the students and the HCPs, communication plays a major role and also is the cornerstone of success for healthcare organizations.

Communication is one of the most important components of diagnosis and is majorly responsible for the students' feel-good factor at the medical centre of their college. It develops a strong student-doctor relationship. In order to elicit the information necessary for diagnosis, the doctors and nurses need to ask relevant questions in an appropriate manner so that they feel comfortable. As we are aware, an uncomfortable student may withhold information, may hesitate to come the next time or may not follow the instructions carefully. In addition, students coming from diverse cultural backgrounds may encounter certain communication barriers pertaining to language and culture. All of us are aware that when students are away from their home and stay in college hostels, they miss their home and parents; when they fall ill, they miss more. Hence during such difficult times, the HCPs can relieve their stress by communicating with care. In all, we can say that effective communication plays a crucial role in the interaction between students of a college and the HCPs at the medical centre on their campus.

Research Objectives and Methodology

A study was undertaken to realize the following objectives:

- to understand how important is communication between students of a college campus and the HCPs in the medical centre of that college
- to understand the barriers that arise when students communicate with the HCPs
- to identify the strengths and shortcomings of the communication between students and the HCPs

Keeping all the communication related activities which involve interaction between students and the HCPs on campus, it was decided to conduct a survey among the students of BITS Pilani, K K Birla Goa Campus located in Goa, India, to collect relevant data. A questionnaire containing 10 questions was prepared and the students were asked to respond online. Factors such as *the types of questions used by the HCPs to understand and diagnose the disease, the hesitation of students in sharing information with the HCPs, the behavior of HCPs, etc.*, were included in the list of questions. The questionnaire was shared with over 500 students of which 155 responded. Students were selected randomly from all the five years of study. The collected responses were analyzed to identify how effectively the HCPs communicated with students during the latter's visit to the medical centre. The analysis led to certain

important inferences some of which may satisfy the HCPs while some others may enable them to understand the shortcomings and to overcome them.

Analysis of the Data

The campus in question has a medical centre which provides various medical services, such as diagnosis, treatment, testing, physiotherapy, etc. In case of major illness wherein the students are required to be in patients, they are shifted to a nearby hospital. The medical centre provides the services of three doctors, four nurses and one technician, one receptionist and one attendant. When students visit the centre for treatment or pathological tests, they need to communicate not only with the doctor but also with other HCPs there.

The following section presents the analysis pertaining to the factors considered in each question:

1. Language Barrier in Communication

Salant and Lauderdale (2003) and Timmins (2002) mention that health literacy, culture and language affect health outcomes and hence the nurses are expected to think about these factors not as neatly co-occurring but rather as messily interacting in different ways, to different degrees, for different patients. Words are understood differently in different cultural contexts and hence may affect the communication between patients and the doctors. The campus in question houses students from various parts of India and hence has a diverse cultural setting. Though these students understand English, they may find it difficult to understand the style of pronunciation, accent and intonation used by the HCPs at the medical centre. But it is heartening to note that more than 50% of the students did not face any problem related to language barriers. While 10.3% faced problems in their communication with doctors, 22.65% encountered communication problems with nurses, technicians, etc. Only 11% said that language barriers affected their communication with both doctors and others (Figure 1). As the college is an institution of engineering and technology and the quality of students is extremely good, the communication problems are less as compared to other Indian colleges where inadequate proficiency in English may act as a serious barrier to communication.

Have you ever faced a language barrier while communicating with a healthcare practitioner?

(155 responses)

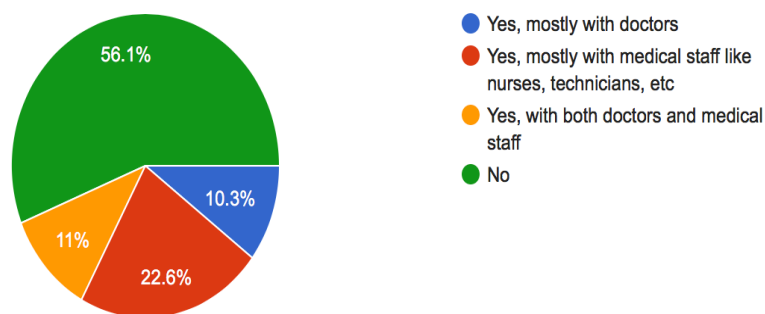


Figure 1. Language barrier in communication with HCPs.

2. Communication Gap Leading to Incorrect Diagnosis

Patients in a hospital quickly form their first impressions based on a series of experiences that take place from the time they enter the hospital complex to the time they exit it. They go by what they see, hear and touch—the behavior, communication, attitudes and professionalism of the HCPs (Thomas, 2012). They expect the HCPs to understand quickly their complaints, diagnose and prescribe medicines. At times, when students explain the symptoms of their illness, the HCPs may not listen to them with focus; they may not listen to them completely. Hence, it is possible that such inadequate listening may lead to incorrect diagnosis. For example, let us assume that a student informs the doctor that he has had fever and body ache for the last two days and that he already had some medicines prescribed by his family doctor from his home town. If the doctor at the medical centre does not listen to the later part of his information, he may end up in incorrect diagnosis. Figure 2 reflects that about 45% of students have experienced communication gaps that had led to incorrect diagnoses.

Has a communication gap between you and your healthcare practitioner ever led to an incorrect diagnosis?

(155 responses)

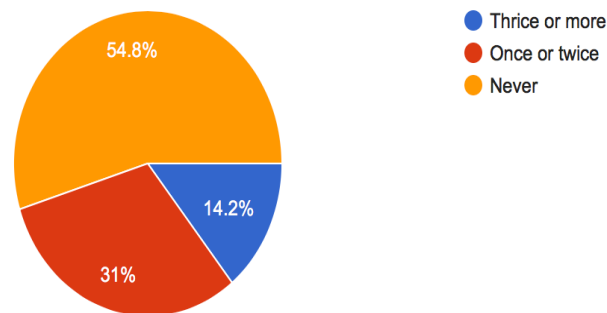


Figure 2. Communication gap leading to incorrect diagnosis.

3. Importance of Clinical Interviews

Clinical interviews enable HCPs to gather information, to build relationships and to educate patients and each of these functions occurs to some extent during the interviews. McCorry (2011) opines that the relationship between the HCP and the patient is often an unequal one; Hugman (2009) mentions that though patients in general do not want personal intimacy with their HCPs, they do want to feel that relationships have those qualities which would, in other circumstances, permit intimacy—the qualities that simulate trust, confidence, openness and healing. By using effective communication which is clear, direct and precise, HCPs at the medical centre can not only elicit information but also make students feel comfortable during their clinical interviews. In other words, the one to one conversation between the HCP and the students plays a major role in diagnosis and treatment of the illness. Figure 3 presents the data collected for the question on clinical interviews. Almost 50% feel that clinical interviews are very important for the diagnosis of diseases.

How would you rate the clinical interview's importance as a diagnostic tool?
(155 responses)

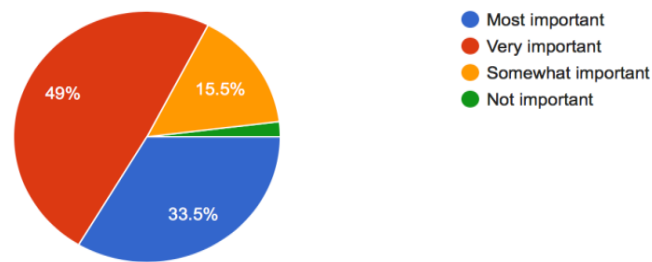


Figure 3. Importance of clinical interviews.

4. Sharing Sensitive Information

The physician who encourages open communication may obtain more complete information, enhance the prospect of a more accurate diagnosis, and facilitate appropriate counseling, thus potentially improving adherence to treatment plans that benefits long-term health. Differences between physicians and patients, including culture, gender, race, and religion, can introduce bias into patient–physician communication. According to the American College of Obstetricians and Gynecologists (2014), comfort, acceptance, responsiveness and empathy are the essential qualities of caring, effective communication skills. Among these qualities, comfort and acceptance refer to the physician's ability to discuss difficult topics without displaying uneasiness, and the ability to accept the patient's attitudes without showing irritation or intolerance. In fact, satisfactory communication relies not on the newest innovation of technology, but rather listening to what others are saying, preparing before you speak or write, and offering positive, concrete feedback (Bernard, 2001). Unless students feel comfortable, they may not share certain sensitive information related to their illness. Of course, not all students have inhibitions. Depending on their background, upbringing, etc., they may or may not like to share sensitive information. However, if the HCPs are able to express a sense of trust during the clinical interviews, students may come out openly with their problems, even the sensitive ones. Figure 4 below reflects that about 78% of the students are ready to share sensitive information with the doctors while the remaining 22% have some inhibitions.

Do you feel comfortable sharing sensitive information with your healthcare practitioner without feeling judged or ashamed?
(155 responses)

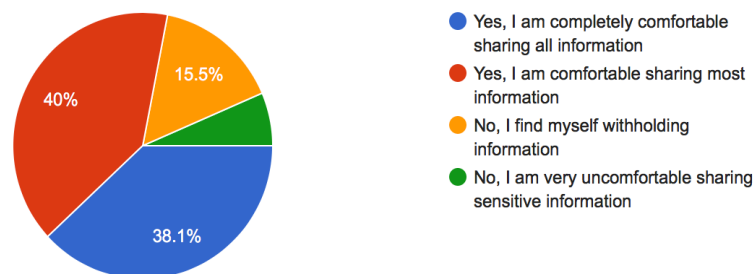


Figure 4. Sharing sensitive information.

5. Line of Questioning

Starting from taking down the details of patients till following up the treatment, the HCPs need effective communication skills in asking questions to the patients. Only by asking questions, they can understand the nature of illness and decide the treatment. Even before prescribing medicines, HCPs need to find out from the patients about any allergic reaction or side effects of a particular medicine, etc. They may ask open questions such as, “How are you?”, “tell me about your cough,” etc., or questions with options, such as, “Is there pain while coughing?”, “Are you allergic to penicillin drugs?”, etc. However, at times the HCPs may ask some questions which the patients may not want to answer or which may make them uncomfortable. For instance, in substance abuse cases, students may not be comfortable with direct questions asked by the doctor. Likewise, they may feel embarrassed when HCPs ask question about their sexual orientation. However, in the college campus taken for this study, almost 60% of the respondents were comfortable with the questions asked by the HCPs while 26% were feeling uncomfortable on few occasions. But it is to be noted that 15% of them felt uncomfortable with the line of questioning (Figure 5). At times even when students try to answer the difficult questions, HCPs may embarrass them with the responses to such questions. Hence the question was framed including both the line of questions and the HCPs responses to students’ answers.

Has a healthcare practitioner ever embarrassed you or made you uncomfortable with their line of questioning or response to your answers?
(155 responses)

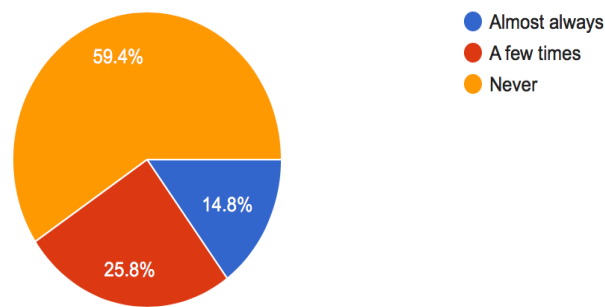


Figure 5. Line of questioning.

6. Attention and Respect to the Complaint

Communication selectivity may act as a barrier to patient-doctor communication because effective communication involves full and undivided attention from the receivers (Raman, 2015). We might have noticed that some HCPs attend many other functions while listening to a patient. They may respond certain phone calls, sign some papers, and the like. Such interruptions irritate the patients because they feel that the HCPs are not paying attention and respect to their complaints. So, when a question was asked covering this ‘attention and respect’ issue, the following choices were given to the students to fill in, along with the “never” option:

- Ignoring many things which I communicate
- Not giving enough time to me to explain my problem
- Overruling my explanation to directly reach a conclusion

The data collected clearly shows (Figure 6) that about 63% of the students mentioned that the doctor either ignored parts of their description or did not give enough time to explain. About 28% felt that the doctor jumped to conclusions disrespecting the students' explanations.

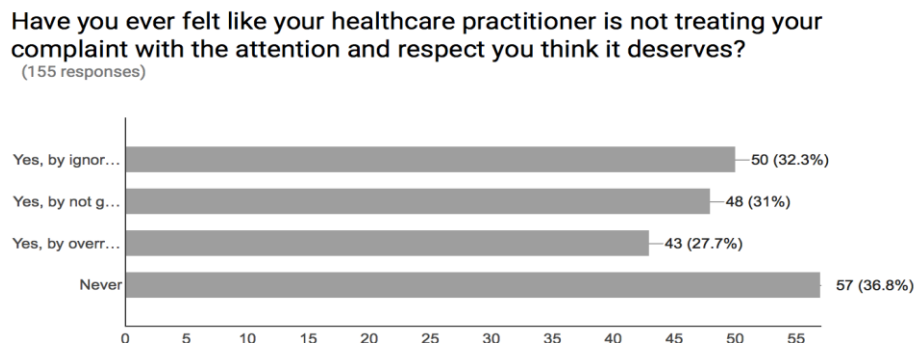


Figure 6. Attention and respect to the complaint.

7. Empathy and Concern for the Patient's Well-being

Apart from verbal communication, the HCPs also use nonverbal means of communication to express their concern, empathy and understanding, etc., to their patients. In fact, in doctor-patient communication, the nonverbal cues play a greater role than the words spoken, specifically to display the concern and empathy. For instance, when students explain their health problems, if the doctors at the medical centre just pat the shoulder of students signaling the assurance that their problems will be taken care of, students may feel satisfied. At that time what students need is some comforting gestures and words.

It is good to note that 85% students of the campus in discussion feel that the doctors show empathy and concern to them when they visit the medical centre. This factor is something that the campus HCPs can feel happy about (Figure 7).

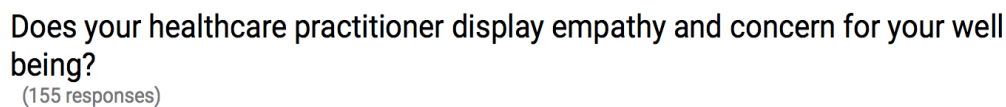


Figure 7. Displaying empathy and concern.

8. Disclosing Bad or Unpleasant Results

Gone are the days when the patients had not expected the HCPs to disclose bad or unpleasant news about the disease directly to them. Today, in the information era, patients are well informed through various sources about the symptoms of a disease and also the possible diagnosis. So, the challenge lies in *how to break the bad news*. Ptacek says, “Breaking bad news can be particularly stressful when the clinician is inexperienced, the patient is young, or there are limited prospects for successful treatment” (1996). When students of the campus were asked about the way in which the HCPs disclosed the bad news, the following options describing the manner of disclosure were given to them:

- Used very unpleasant language (behavior was bad)
- Did not sympathize
- Informed late (failed to inform on time)
- No, Never
- I have never received unpleasant news/ test results

72.2 % (17.4+34.2+20.6) of them felt that the HCPs had not used desirable means of disclosing the bad news (Figure 8). In fact, this finding needs some careful attention from the HCPs at the medical centre.

Have you ever been dissatisfied with the way a healthcare practitioner delivered bad news or unpleasant test results?

(155 responses)

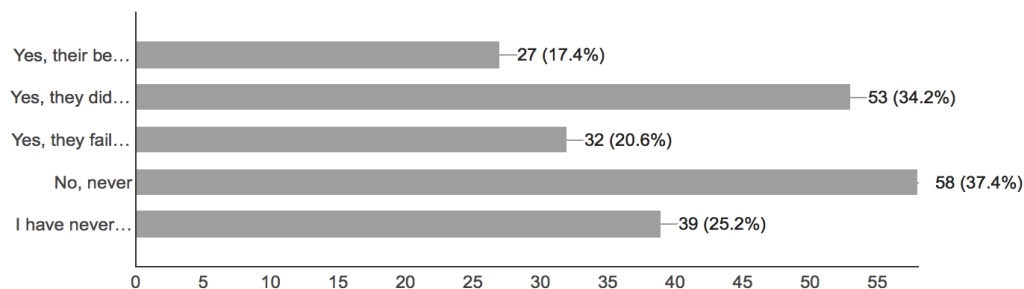


Figure 8. Breaking bad or unpleasant results.

9. Parameters Affecting Healthcare Communication

Many factors interfere with the communication process between students and the HCPs at the medical centre. Some HCPs may be familiar with the students through the students' parents who keep talking to the HCPs and visiting them whenever they come to the campus. Some other HCPs may be giving importance to the financial and social status of the patients. For instance, a student's parents may be affluent and occupy top positions in Indian government. Even gender of the patient may interfere with communication. When a male doctor examines a female student, the latter may or may not feel comfortable while communicating. Servellen (2009) mentions that in the helping-healing process, awareness of the other's culture and the differences that exist between the patient and provider will enable the provider to anticipate misunderstandings and further sensitize providers in their interactions with patients. Above all these factors, the type of disease also may affect the communication style and pattern.

According to you, which of the following parameters should affect the way a healthcare practitioner communicates ?

(155 responses)

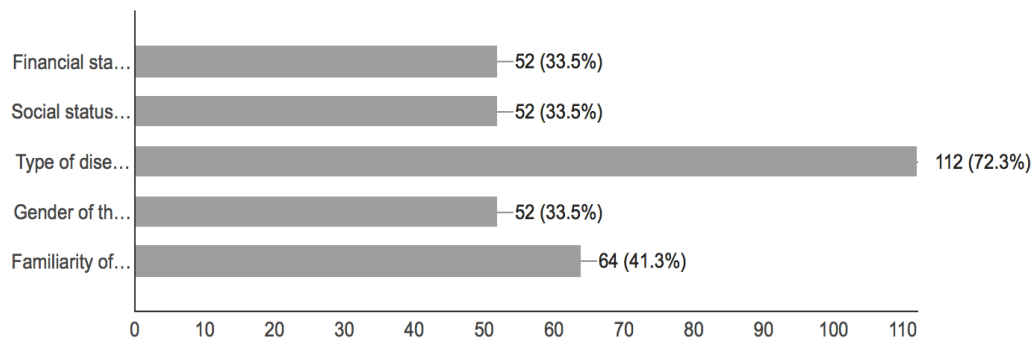


Figure 9. Factors affecting communication.

When a question was included for identifying the various factors that affect student-doctor communication, the following options were provided and students were asked to choose any number of options:

- Financial status of the patient
- Social status of the patient
- Type of disease patient is suffering from
- Gender of the patient
- Familiarity of the patient

From the responses received (Figure 9), it is found that the type of disease affects the most and the other factors affect almost to equal extent.

10. HCPs' Understanding of Effective Communication

Lack of communication skills in students or HCPs can be considered as their Achilles' Heels. Only when they fail to communicate their ideas clearly, they may realize their weakness. Many a time, in their busy schedules, HCPs do not pay adequate attention to their communication with students and hence are misunderstood. In fact, it is very hard to change the already formed opinions in the minds of students just like it is difficult to unlearn what we have already learnt. However, none of us can ignore the importance of effective communication in our lives. In the healthcare setting, communication mainly helps the HCPs to understand the patients' problems and explain to them their health condition. Hence, the following options were included in the question on "understanding the importance of communication":

- To be able to understand the patient's problem
- To be able to better explain to the patient his/her disease

The majority of the respondents selected the first option as depicted in Figure 10. They did so because they expect that understanding the problem correctly is the first step towards the right diagnosis and right treatment.

Do you think more healthcare practitioners need to understand the importance of effective communication? (155 responses)

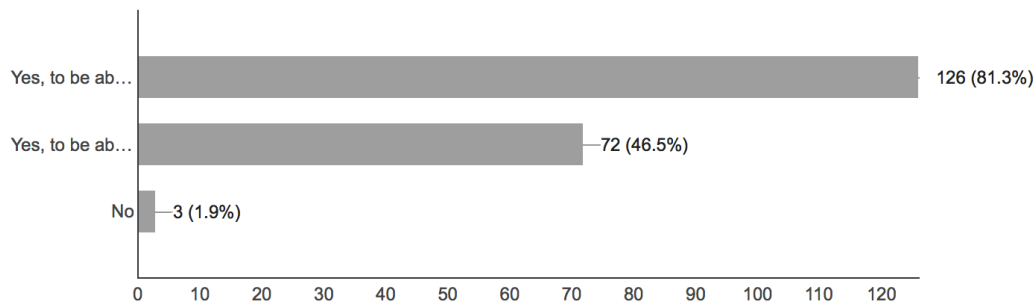


Figure 10. Understanding the importance of effective communication.

Findings and Conclusions

The preceding analysis reveals the findings listed below:

- (i) About 44% of the respondents feel that they had faced language barriers while communicating with the HCPs at the medical centre. Inadequate proficiency in English and the cultural differences were cited as the major barriers.
- (ii) 45% of the respondents feel that they had experienced a communication gap such as incomplete listening, lack of focus, etc., during their interaction with HCPs and this gap led to incorrect diagnosis.
- (iii) 83% feel that clinical interviews are very important in diagnosis.
- (iv) 78% feel comfortable in sharing sensitive information with the HCPs at the medical centre of the campus.
- (v) 60% find the line of questioning used by the HCPs comfortable while 40% feel embarrassed by the way questions were put to them.
- (vi) Participants were asked to choose any number of options regarding the issue of *attention and respect* given to their complaints. Only 36% feel that they were given due attention and respect while many of them felt that the HCPs— ignored some parts of the complaint/did not pay full attention/jumped to conclusions.
- (vii) 45% feel that the HCPs did not show any empathy or concern to them but the remaining 55% feel that the HCPs did show concern and empathy.
- (viii) 35% of the respondents feel that they were dissatisfied with the way the HCPs communicate bad news or unpleasant test results.
- (ix) Among the various factors that affect the communication between students and HCPs, *the type of disease students suffer from* occupies the top position though other factors such as financial/ social status, familiarity of the student, etc., also affect significantly.
- (x) 80% of the respondents feel that the HCPs should communicate effectively in order to understand the students' illnesses and to explain the diagnosis / results/ treatment clearly.

Devi Prasad Shetty, Chairman of Narayana Hrudayalaya Group of Hospitals in India, regrets that doctors in India hardly receive any training to deal with the emotional aspect of communication which is an important component of healthcare delivery. Even if some doctors are effective in understanding the emotional aspect and communicate effectively, the CEOs of hospitals are more interested in knowing

the number of patients the doctors can see in an hour rather than appreciating the quality of care (Thomas & Rao, 2012).

As far as the medical centers in most college campuses in India are concerned, they operate with few doctors and paramedical staff for treating minor illnesses; they invite some specialists to visit the centers on regular basis for consultation. But when there is an emergency, the patients are given immediate attention and then shifted to a nearby multispecialty hospital for further treatment. At times, the campuses have to face some revolt from students when one of their friends dies even if the medical centers provide the right treatment.

College campuses in India inhabit students of age group 18-22. Students admitted to BITS Pilani, K K Birla Goa Campus through rigorous procedures and spend good amount of money for their education. Hence, parents expect a good care from the institute administration not only in their studies but also in their health-related matters. Thus it becomes imperative for the medical centre on campus to shoulder the responsibility with the college administration. When it comes to health issues, communication plays a vital role as we have discussed in the preceding sections.

The survey was instrumental in understanding the strengths and shortcomings in the communication that happens between the students and the HCPs at the medical centre. The findings clearly reflect the importance of effective communication for HCPs working in the medical centres of educational institutions. Though most of the students feel comfortable in sharing sensitive information with the HCPs, they are not very happy with several other communication strategies adopted. The findings reveal such factors that require certain corrective actions to be implemented not only to enhance the effectiveness of communication between students and the HCPs but also to avoid certain unpleasant situations that arise during their interactions. It is suggested that another survey among the HCPs can be conducted to understand their perspectives on the communication effectiveness of students who visit them at the medical centre.

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