Effect of Nonverbal Communication Training on Nursing Educators' Skills from the Students' View

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ABSTRACT:

Background: The successful lecturer-student nonverbal communication has a major impact on students' learning. **Objective:** The present study aimed to assess the effect of nonverbal communication training on nursing educators' skills from the students' view. Methodology: A quasi-experimental design was used. Sample: A random sample of 92 nursing students. Tools: Socio-demographic sheet and Nonverbal Communication Questionnaire were assessed. Official permission was granted by the Dean and Vice Dean of Education and working Affairs. The study proposal was approved by the ethics committee of the faculty of nursing Zagazig University. Results: The study revealed that there were changes occur in total nursing students' view scores regarding educators ' nonverbal communication after training intervention sessions, where the total mean and standard deviation difference was 54.42±18.5. Changes in all domains of nursing students' views have a highly statistically significant difference (P=0.00). This table also mentioned that mean and standard deviation difference of educators' time, movement, appearance, place, and voice were (16.57±6.29, 11.63±4.07, 11.28±3.68, 9.2±3.49, 6.28±2.53) respectively from higher to lower after implementation of the program. Also, it clarifies there was an improvement of nursing students' view of their educators' nonverbal communication after training program between pre and post-test from 44.6% to 0% inadequate. The difference was statistically significant (P=0.00). Conclusion: The study concluded that the nonverbal communication training program for educators had a positive effect on improving students' view of educators' nonverbal communication skills.

KEYWORDS: Nursing Educators, Nonverbal Communication, Students' View, Training.

INTRODUCTION:

Communication refers to the reciprocal process in which messages are sent and received between two or more people. In general, there are two parts of the face to face communication: the verbal expressions of the sender's thoughts and feelings, and the nonverbal expressions [1]. Communication in medical encounters comprises verbal and nonverbal aspects. If these forms of communication are inconsistent or contradictory, the nonverbal messages tend to override the verbal messages. Mehrabian and Ferris even developed a formula for verbal and non-verbal effects of a message: total impact = .07 verbal + .38vocal +.55 facial [2]. It is not only by means of words that communication takes place; nonverbal communication (or body language) is equally essential. These include ways of talking (e.g., pauses, body contact, stress on words), (e.g., shaking hands), posture (e.g., slouching), facial expression (e.g., frown), appearance (e.g., untidiness), closeness (e.g., coming too close to someone), eye movements (e.g., winking), head movements (e.g., nodding), sounds (e.g., laughing), hand movements (e.g., waving), etc. Commonly, this form of interaction is subconscious [3]. Also, senders encode vast amounts of information along visual, auditory, olfactory, and tactile channels of communication, including who they are; their emotional, cognitive, and attitudinal states; and the nature of their interactions with others. The informational value of each sender cue may be reinforced, contradicted, augmented, minimized, or not impacted at all by other sender cues or contextual factors that accompany it [4]. Furthermore, nonverbal communication includes five senses and everything that doesn't involve the spoken or written word. Nonverbal communication elements like voice rhythm, eye contact, and body posture are also just as critical as verbal messages. The Sociocultural context is an important impact on the importance of nonverbal behavior. Nonverbal signals are readily misinterpreted by people of different cultures. Hence; an assessment and reaction to nonverbal signals are essential elements of nursing care [5]. A nurse educator is the nurse faculty member beginning a position in an academic setting or in the transition to that role. This individual may be currently enrolled in graduate education courses or have recently completed a master's or doctoral degree and now is launching an academic teaching position .or new faculty may be a seasoned graduate degree- prepared nurse with a lengthy and specialized practice history and now is changing career roles and moving into higher education for the first time [6]. Additionally, educators must do much more than just disseminate information to their students; the effective instructors will not only be experts in their field, but they will also be experts in classroom communication [7]. Essentially, effective communication skills are necessary for nurse educators, as they must interact with nursing staff to promote clinical learning for the students and make suitable clinical assignments for students. Communication skills are important for cooperation and efficient teaching with other nurse educators [8]. On the other hand, students may have had a point of view about educators in their background experiences. In such cases, instructors in faculties have to turn negative ideas into positive ones if it is needed [9]. The researchers point out the fact that students in higher education clearly understand that having pedagogical and content knowledge is not enough for the teacher to be effective. Students want and need to see a teacher as a professional educator, not simply a vessel of knowledge [10]. Furthermore, some students express verbally whether they understand the subject or not, teachers with a good knowledge of body language can understand it by watching the body dialect of students. Also, the researchers presented that the positive body language gestures used by teachers in classroom communication influence students positively whereas negative body language gestures influence them negatively [11]. Most of the students indicated how motivated they become as a result of the teacher's eye contact, mimics, and gestures feeling them comfortable, confident, and important. Teacher's non-verbal communication creates a comfortable and relaxing atmosphere for students and this enables them to have selfconfidence which also leads to an increase in participation and contributions to the lesson [12]. Therefore, teachers tend to need to practice and develop viable nonverbal communication skills, particularly for those who have constantly interacted with a large community of students. If an instructor is technically qualified but is unwilling to interact with the learners efficiently, he is unable to teach satisfactorily; thus, the teaching-learning cycle has not been completely applied [13]. The teacher needs to possess the knowledge and skills of both verbal and non-verbal communication to communicate better with students.

Awareness of non-verbal behavior permits the instructor to end up superior recipients of students' messages and to become a better sender of signals that reinforce learning. Thereby, a nonverbal communication training program may enable pre-service teachers to develop their nonverbal communication to attract interest and maintain students' engagement in classroom transactions. Effective use of non-verbal communication has a beneficial impact on students' participation and focus in classroom transactions [14].

Significance of the study

The training program on non-verbal communication can be introduced in the primary teacher education program so that the student-teachers of these courses are enabled to interpret the nonverbal cues of students. They can be made aware of the effect of their nonverbal cues on the students and the teaching-learning process. Also, the training program on the proper use of nonverbal communication can be added as one of the aspects to be dealt with in the orientation and refresher courses organized for teachers teaching in the field of higher education.

The aim of the study

The current study aimed to evaluate the effect of nonverbal communication training on nursing educators' skills from the students' view.

Study hypothesis

The training program will enhance nursing students' views of their educators' body language skills.

Method:

Research design: A quasi-experimental design was adopted in this study with a pre-post assessment of the effect of training sessions to achieve the stated aim.

Study setting: The study was carried out at the Faculty of Nursing, Zagazig University.

Study subjects: A random sample of 92 nursing students was recruited for this study according to the following, inclusion criteria:

1- $3^{rd}\& 4^{th}$ academic year

2- Male & Female Students

Reason for selecting 3rd&4th grades:

The fact that the students in the third and the fourth academic years acquired sufficient experience in the interaction and the communication with faculty members more than the students in $1^{st} \& 2^{nd}$ year students.

Tools of data collection

Part I: Socio-Demographic Sheet (appendix I): This tool was developed by the researcher to collect demographic data about nursing students such as age and sex.

Part II: 1-Nonverbal Communication Questionnaire (Pre-Post): This tool was developed by ¹⁵to assess the nonverbal communication skills among assistants teaching staff from the opinion of students. It consists of 51 items, grouped into five dimensions namely; teacher's appearance; voice; place; time, and movements of the body. The assessment is measured on a 4-pointLikert scale, the four categories of the scoring system are (1) high availability, (2) moderate availability, (3) weak availability, (4) absent, items 5, 14, 15, 25, and 50 are reverse scored when entering data.

Scoring system

1- Adequate staff's non-verbal communication skills > median of a score.

2- Inadequate staff's non-verbal communication skills<median of a score.

Reliability: The reliability of this tool was assessed by Cronbach's alpha test in SPSS V.20. They show a good level of reliability as ($\alpha = 0.948$)

Pilot study: The pilot study was carried out on 9 students (about10 percent of the total sample) to test the clarity and applicability of the study tools as well as estimation of the time

needed to fill the questionnaire. Students involved in the pilot were excluded from the study. From the pilot study outcomes, the average time to fill in this tool was 25-30 minutes.

Fieldwork

The study was executed in six months. It involved the four phases of assessment, planning, implementation, and evaluation.

Assessment phase: Once the scales are completed and official approval is obtained. The researcher first briefly explained to educators (Demonstrators & Assistant lecturers only) and students the purpose of the study. They were approached, and they received oral permission for involvement. They have been told that the details gathered would be handled confidentially and used for analysis only. The time is taken to answer all questions and tools varied between 25-30 minutes. That phase lasted 1 month.

Planning phase: The researcher structured the design of the training program to educators according to the findings obtained from the students' view pre-assessment. The training curriculum was established following the analysis of literature relevant to it. Detected desires, criteria, and weaknesses were converted into the training program's mission and priorities and were contained in a textbook. This booklet consisted of two main parts, the first theoretical part included knowledge about nonverbal communication, stress management, emotional awareness, and the second a practical part that included methods of relaxation techniques, activities of reading nonverbal communication, activities about using eye contact, facial expression, tone of voice and so on. Teaching methods included a demonstration, role-play, group discussion, and brainstorming that were frequently applied during sessions.

Program implementation phase (For educators only): The program was introduced in the session's style. Through session varied in duration from 45-60 minutes. The educators were split into four groups, each containing twelve educators. The session was administered once/ week four for each study group. The total number of sessions was 14 sessions for each group. This phase lasted for 14 weeks.

Content of training program sessions was as follows: (a) the purpose of the program; (b) the definition, types, and importance of nonverbal communication; (c) basics, principles of nonverbal communication, factors affecting on them; (d) definition of psychological stressors, effects of it on nonverbal communication, strategies of stress management;(e) definition of emotional awareness, the role of it in developing nonverbal communication skills and the steps of building emotional awareness; (f) definition of eye contact, its importance, and activities of improving it; (g) types of facial expressions, the methods of getting used to more smiling; (h) importance of personal appearance, steps to improve it; (i) the voice properties, the importance of the diversity in voice tones, and how to control of voice tone; (j) the types of hand movements, finger, elbow positions, and an activity of hand movement direction;(k) the main positions of standing, types of sitting, head gestures and activity of head movements; (1) personal space and rules of its respect, the order of seating and attention areas, power of the touch; (m) the methods of ice breaking, the boredom indicators of in non-verbal communication of students, general guidelines to improve nonverbal communication; (p) termination of the training program. It also involved communication links, express gratitude.

Evaluation phase: The evaluation of the effectiveness of the training program was done immediately after its implementation by comparing the change in students' view of educators' nonverbal communication by applying the same tools of the pre-test. This phase lasted for 1month.

Administrative and ethical considerations:

Official permission was granted by the Dean and Vice Dean of Education and working Affairs. The study proposal was approved by the ethics committee of the faculty of nursing. The students were given a normal description of the aims of the study, the benefits, and nonparticipation or withdrawal rights at any time without giving any reasons. The students were informed that their participation in this study was voluntary; no names were included on the questionnaire sheet. The students were assured about the confidentiality of the information gathered and its use only for their benefits and for the study.

Statistical Design

Data collected throughout history, questionnaires, outcome measures coded, entered, and analyzed using Microsoft Excel software. Information was at that point imported into Statistical Package for the Social Sciences (SPSS version 20.0) (Statistical Package for the Social Sciences) software for analysis. According to the type of data qualitative represent as number and percentage, quantitative continues group represented by mean \pm SD. Difference and association of qualitative variable by Chi square test (X²) paired percentage. Differences between parametric paired data paired t-test. P-value was set at <0.05 for significant results &<0.001 for a highly significant result.

RESULTS

Table 1

indicates that the students' age ranged between 19 and 22 years with mean 20.61±1.03 years, and 66.3% of them were females. The table also reveals that 76.1% of studied students were residing in rural areas, and 63.0 % of them were 4th academic degrees.

Socio-demographic		Ν	%	
Characterist	ics			
Age	19.00	18	19.6	
	20.00	19	20.7	
	21.00	35	38.0	
	22.00	20	21.7	
	Mean± SD	20.61±1.03		
	Median (Range)	21.0 (19-22)		
Sex	Male	31	33.7	
	Female	61	66.3	
Residence	Urban	22	23.9	
	Rural	70	76.1	
Academic	3rd grade	34	37.0	
grade	4th grade	58	63.0	
	Total	92	100.0	

Table (1): Socio-demographic characters and personal characteristics of studied nursing students (N=92)

Table 2 clarifies changes that occur in total nursing students' view scores regarding educators' nonverbal communication after training intervention sessions, where the total mean and standard deviation difference was 54.42 ± 18.5 . Changes in all domains of nursing students' views have a highly statistically significant difference (p=0.00). This table also mentioned that mean and standard deviation difference of educators' time, movement, appearance, place, and voice were (16.57 ± 6.29 , 11.63 ± 4.07 , 11.28 ± 3.68 , 9.2 ± 3.49 , 6.28 ± 2.53) respectively from higher to lower after implementation of the program.

Domain	Students' v	view score	Post/pre	Paired-	P-
	Pre(n=92) Post(n=92		difference(t-test	value
)		mean± SD		
	Mean±	Mean±			
	SD	SD			
Educators'	26.63±4.9	37.35±1.2	11.28 ± 3.68	-	0.00**
appearance		2		20.299	
Educators' Voice	20.63±3.2	26.91±0.6	6.28 ± 2.53	-	0.00**
		7		18.208	
Educators' use of	20.64±3.8	29.84±0.3	9.2±3.49	-	0.00**
Place	5	6		22.817	
Educators' use of	29.88±7.4	46.45±1.2	16.57±6.29	-	0.00**
Time	9			20.939	
Educators'	35.72±5.8	47.35±1.7	11.63 ± 4.07	-	0.00**
Movement		3		18.426	
Total score	133.5±21.	187.92±3.	54.42±18.5	-	0.00**
	9	4		23.456	

 Table (2):Pre-post training intervention scores of total nursing students 'view regarding educators' nonverbal communication (N=92)

Figure 1 demonstrates the improvement of nursing students' view of their educators' nonverbal communication after training program between pre and post-test from 44.6% inadequate to 0%. The difference was statistically significant (p=0.00).

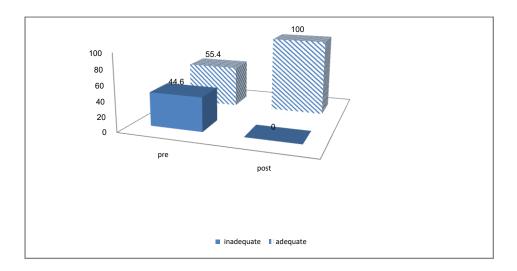


Figure (1) Comparison of Total Nursing Students' View of educators' nonverbal communication at Pre/Post Training Intervention (N=92)

Table 3

indicates that no statistically significant relation was found between students' assessment of staff ' body language and their age, sex ,place of residence or academic grade at pre-training intervention.

Students'		Student assessment		Total		\mathbf{X}^2	Р		
demographic data		Inadequate Adequate							
		Ν	%	Ν	%	Ν	%		
Age	19	6	14.6	12	23.5	18	19.6	3.76	0.2
	20	6	14.6	13	25.5	19	20.7		8
	21	18	43.9	17	33.3	35	38.0		
	22	11	26.8	9	17.6	20	21.7		
Sex	Male	13	31.7	18	35.3	31	33.7	0.13	0.7
	Female	28	68.3	33	64.7	61	66.3		1
Place of	Urban	11	26.8	11	21.6	22	23.9	0.34	0.5
Residenc	Rural	30	73.2	40	78.4	70	76.1		5
e									
Academi	3rd	11	26.8	23	45.1	34	37.0	3.25	0.0
c Grade	grade								71
	4th	30	73.2	28	54.9	58	63.0		
	grade								
Total		41	100	51	100	92	100		

Table 3: Relation between students' demographic data and their opinions regarding educators' nonverbal communication skills at pre-training intervention, **N.B:** Relation in post-training intervention can't be done as all samples are adequate

DISCUSSION

Students do not rely on teachers' words alone; they interpret difficult words and messages through teachers' gestures and facial expressions. Therefore, the teachers need to use nonverbal communication to facilitate students' understanding of messages and to communicate more effectively [16]. Also, the way university students interpret the teacher's eye contact, mimics, and gestures are different. They mostly perceive nonverbal communication as a source for motivation, concentration, enthusiasm, and a tool for taking and maintaining attention [12]. Therefore, the present study aimed to evaluate the effect of nonverbal communication training on nursing educators' skills from the students' view. The effect of the program on students' views of the educator's nonverbal communication was measured through five categories of Nonverbal Communication Questionnaire including; the appearance, the voice, the place, the time and the body movements. Regarding the students' view of the educators' appearance, the result of the current study showed that there was a highly statistically significant difference in the study group between pre and postimplementation of the training program. This may be due to an increased level of awareness regarding the importance of attention to appearance and choosing the appropriate clothes and perfume among educators as a result of the training program, which affected positively students' view of the staff's appearance. Similar findings were reported by a European study done by [17] who indicated that the students might construct their opinion of the professors based only on their physical appearance, especially in the first lecture. Certain dress codes are expected of the professors in class, and the smell of a professor can influence the reception of the class content. Also, teachers' implementation of the appearance training program improves students' perception of teachers' role and performance. Concerning the students' view of the educators' use of voice, the result of the current study revealed that there was a highly statistically significant difference in the study group after the implementation of the training program. This positive change in students' view about the staff' use of voice can be attributed to the improving sensibility of educators to the voice characteristics which enable educators to diverse in their voice tone and speed according to the lecture needs, and emphasize the important parts slowly that in turn help to attract the attention of students and better understand the content during the lecture. This is in agreement with a Saudi study conducted by [18] which revealed that there was an improvement in students' response after lecturers' practicing immediacy behaviors including voice. Further, the result of the current study showed that there was a highly statistically significant difference in students' view of the educators' use of place before and after the implementation of the training program. This finding might be attributed to advancement in realization regarding teaching space among educators that enable them to care with lighting and ventilation inside the class, organize the sit seats before the lecture, and keep the distance between them and their students during and after the lecture, which affected positively on students' view of staff' use of place. Nearly similar finding was supported by [13] who illustrated that there were improvements in students' response toward their educators after improving staff' place in the intervention program. As regards students' view of the educators' use of time, the result of the current study showed that there was a highly statistically significant difference in the study group after the implementation of the training program. This positive change in students' view about staff' use of time can be attributed to developing the perception of educators to use the time in the lecture which helps educators to attend to the lecture on time, give the students chance to participate in a time of change lecture, give the students time to express their opinions and ask questions during the lecture. This finding was supported by [17] in the University of Rijeka which revealed that the way teachers perceive time, structure it and react to it helps students understand better the content taught & improve students' satisfaction regarding their teachers' nonverbal communication. Also, the result of the present study indicated that there was a highly statistically significant difference between the pre and postprogram phase in students' view of educators' body movements. This finding might be attributed to raising in body movements skills among educators that enable them to maintain visual contact with students, use body movements and facial expression to keep students' attention and use a proper physical contact during the lecture, which affected positively on students' view of staff' body movements. Also, teachers' proper use of gesture skills would make the students pay heed to the body movements of the teachers in the classroom, which would eventually lead to the attainment of desired students' learning outcomes. This is concordant with an Iranian study of at Shiraz University [13], which showed that if body movement's skill is practiced by teachers, it will have a positive and profound effect on the students' mood and response, and improve their satisfaction regarding their teachers. The implementation of the present study training intervention program led to significant improvement in total nursing students' view of the educator's nonverbal communication. The significant positive effect of the program was further confirmed by multivariate analysis. This finding might be attributed to the non-verbal communication training program enhanced staff's performance regarding the appropriate use of non-verbal skills which in turn helped them in better classroom management, make classroom transaction livelier, stay away from non-verbal cues which hinder learning and use the non-verbal cues which enhance learning. On the other hand, the enhanced performance of non-verbal communication help teachers in interpreting the non-verbal communication of students like, they could identify students who were not attentive in the class by their posture and gestures, the facial expressions of students reflected whether they were able to understand the content delivered by the teacher. It can be said that the training program on non-verbal communication helped the teachers to make their classroom transaction effective which positively affected students' views. These results were in agreement with [19] who showed that there was a statistically significant improvement in inpatients' satisfaction scores for nurses' courtesy and respect on nurses'

communication from before to after the communication-training program. As well, an Indian study conducted by [20] at Grand Valley State University indicated that faculty member's communication training had a positive effect on student's motivation and student' motivation had a positive effect on the affective and cognitive learning. Also, cognitive learning and affective learning were found to have a significant positive impact on student's satisfaction. Concerning the relation between students' demographic data and their assessment of educators' nonverbal communication at pre-training intervention, the present study revealed that there no statistically significant relation between students' assessment of staff ' body language and their age, sex, place of residence or academic grade. Similar findings were reported by [19] who concluded that the demographic variables of patient respondents (gender, age, ethnicity, or highest level of education)had no significant differences from the patients surveyed before the training program and those surveyed after the training period. However, these results were disapproved by a Saudi study of ¹⁸ who reported that there were differences in perceptions of lecturer immediacy between female and male students. As male students were more willing than female students to learn when the lecturer practiced immediacy behaviors.

CONCLUSION

Based on the findings of the current study, it can be concluded that the implementation of the training program is effective in improving nursing students' views of the educator's nonverbal communication after the training program. Therefore, the training program achieved its goals of improving the nursing students' view of their educators.

RECOMMENDATION

• Holding initial training courses on skills of nonverbal communication in the demonstrator training program.

- Communication skills and interview techniques are included as an applied course in the undergraduate curriculum of nursing students.
- Providing regular workshops for nursing students on nonverbal communication and its application in real life.

Conflict of Interest: "The authors declare that they have no conflict of interest".

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