Attending behaviors are the most basic interviewing skills, but they are crucial for successful client interaction. Attending includes the ways in which the marriage and family therapist or couples counselor interacts with and responds to the client family, encouraging further communication. Attending behaviors are both verbal and nonverbal, though the former are more easily controlled than the latter. The focus of this entry is nonverbal communication, which can include body posture, hand gestures, eye contact, facial expressions, spatial distances, touch, vocal qualities, and any other means of communication that do not include words. In fact, the use of silence or the absence of speech is a powerful form of nonverbal communication.

Marriage and family therapists must be aware of their own nonverbal communication, since they are always modeling for the client family. Likewise, family therapists must observe and attend to the clients’ nonverbal communications. Perhaps one of the most difficult aspects of dealing with nonverbal communication is that there is no universal set of rules that applies to all of the different facial expressions, gestures, postures, or eye movements; by and large, their meanings differ depending on the person, situation, and context. Also, similar nonverbal communications can have different meanings, depending on the identities of the message sender and receiver and their relationship. Rolling one’s eyes at another may be a display of irritation and contempt for that person, or it could be a sign of feeling ennui and noninvolvement. The message being communicated is up to interpretation.

There are some nonverbal communications that are more ubiquitous in nature. Research shows that basic facial expressions (e.g., anger, happiness, fear) are displayed similarly across different cultures. Making a “V” with one’s middle and forefingers is usually going to be interpreted as the peace sign, just as sticking up one’s middle finger at another will be interpreted as being rude. This does not, however, account for deception or false displays of emotion. An individual can smile and others will likely interpret that they are happy; meanwhile, that person might be secretly embarrassed and trying to hide his or her true feelings. It can be very difficult to determine when certain individuals are being genuine and when they are attempting to mask their true affect; these are important observations for the couples counselor or marriage and family therapist to make. This entry discusses different types of nonverbal communication, cultural variations in patterns of nonverbal communication, and how couples counselors and marriage and family therapists use the information from nonverbal communication with client families.

**Types of Nonverbal Communication**

**Body Language**

How an individual positions his or her body speaks volumes about what that person is thinking and feeling. An individual with squared-off shoulders and an open body posture is likely having a different experience from that of the individual with rounded, hunched shoulders and closed body posture. Open posture includes uncrossed arms and minimal barriers between individuals; closed posture includes crossed legs and/or arms, as well as physical barriers placed between individuals (e.g., sitting behind a desk, having an object on one’s lap). Body language also includes gestures and body movements. Obvious obscene gestures aside, certain body movements can allow couples counselors and marriage and family therapists to investigate what their client family members are not telling them. For example, the client family member who has her legs crossed, is shaking the dangling foot, picking at her cuticles, and chewing on her lips is probably uneasy in the situation and may
need the help of the family therapist to relax and feel comfortable in the counseling setting.

When individuals like one another and are comfortable communicating with one another, their body language mirrors one another’s. If one spouse is crying and feeling sadness, the other spouse is likely to empathize and frown, or even cry, as a result of the partner’s body language. Likewise, if one spouse is rubbing his partner’s arm and, in turn, the partner begins rubbing the spouse’s arm back, the phenomenon occurring is the mirroring of body language.

Eye Contact and Movement

Eye contact and visual movement are integral parts of nonverbal communication. During conversation, eye contact usually indicates engagement and active listening, that the individual is attending to the situation. Lack of eye contact can be indicative of discomfort, hidden truths, deep thinking, or even boredom. Eye movements are also nonverbal behaviors that affect communication in couples and families. Different unspoken messages are sent by rolling, darting, squinting, or shifting one’s eyes. Frequently, when individuals are silent and they look up, they are thinking; when they are silent and they look down, they are feeling.

Facial Expressions

Observing clients’ facial expressions provides an important clue for couples counselors and marriage and family therapists to interpret subcontext and emotions. Sometimes, the simplest answer is the most accurate one: If a client frowns, the client is probably upset; likewise, if a client laughs, he or she is apt to be in a humorous mood. The couples counselor or marriage and family therapist may simply choose to track the facial expressions of the client family by observing them and addressing them in the present moment. For example, if a client shifts his or her expression from smiling to a furrowed brow and tense lips, it may be prudent for the family therapist to call attention to the shift in client feeling (e.g., “I notice that you stopped smiling when we started talking about your in-laws. Can we address this change in mood?”).

Spatial Relations

Spatial relations can vary greatly from one client family to another. Typical speaking distance between individuals depends largely on cultural norms and family traditions. Some individuals need less distance between one another when communicating, while others need more. In the United States, four zones of spatial relations are generally used: intimate space (the foot of space directly surrounding an individual; generally reserved for romantic partners), personal space (about 2 to 4 feet away from an individual; generally reserved for family and close friends), social space (about 4 to 10 feet away from an individual; generally reserved for business associates and colleagues), and public space (between 10 and 25 feet away from an individual; generally reserved for public speaking). An important note to highlight about spatial relations—and nonverbal communication as a whole—is that, again, there is no one set of guidelines with which to interpret these behaviors. There are differences in spatial relations, or proxemics, according to gender, level of authority, comfort with interpersonal interaction, familiarity, and nationality; there are numerous factors that can affect how close or how far the distance should be between two individuals communicating with one another.

Touch

Spatial relations have to be considered when addressing touch, since touch is dependent
upon closer proxemics. Touch is another type of nonverbal communication that may be interpreted differently depending on the cultural norms of the individuals involved. Again, if it is culturally appropriate for there to be less spatial distance between two individuals communicating, it may also be appropriate for there to be more touch than when there is further spatial distance. When a couples counselor or marriage and family therapist uses touch with clients, it is often to signify caring. This may occur through a hug, for example, or by placing one’s hand on a client’s forearm and rubbing it slightly. These are comforting acts that model empathy for the client family.

**Vocal Quality**

Even though the words we speak are not considered nonverbal communication, the ways in which we speak are considered nonverbal communication. Vocal qualities, also called paralanguage, include the volume at which an individual speaks, the tone of his or her voice, the rate of speech used, verbally underlining or emphasizing certain words, and even the pitch the individual uses. Changes in vocal quality can indicate changes in feelings. A harsh tone delivered loudly and briskly can mean the individual is angry or otherwise upset. An individual speaking in soothing, dulcet tones at a slower pace is likely to be calm or happy.

**Cultural Variations**

It should be noted that cultural differences are likely to exist in nonverbal communications. This is particularly true when addressing spatial distance, as there are varying cultural norms for what is considered typical distance between individuals interacting with one another. Members from some cultures stand closer to one another when communicating, and this physical distance (or closeness) in and of itself is a form of nonverbal communication. This physical distance affects touch, another nonverbal communication type that can vary greatly depending on the client family’s culture and background. For example, Orthodox Jews generally do not believe in mixed-gender touching unless the individuals are related; therefore, it would be inappropriate for a male family therapist even to shake the hand of a female Orthodox Jewish client. Eye contact is another nonverbal behavior that can drastically differ depending on the culture of the couple or client family. In the United States, eye contact is generally expected when an individual is listening; the speaker is usually less likely to make eye contact than the listener. Clients from certain backgrounds will not subscribe to this rule. For example, certain Latino and Asian families will consider eye contact from young listeners to be rude and inappropriate. Couples counselors and marriage and family therapists must be sensitive to the cultural norms of their client families, and be respectful of differences.

**How Family Therapists Use Nonverbal Communication**

This section gives an overview of how couples counselors and marriage and family therapists utilize their understanding of client families’ nonverbal communications.

**Patterns of Nonverbal Communication**

Family therapists must observe and track patterns of clients’ nonverbal communications. They have to be able to point out to clients when their nonverbal communications are being heard loudly and clearly. Many client family members are unaware of their nonverbal communications with one another, and may need the family therapist to shine a light on the situation. By addressing nonverbal communications when they are occurring in the moment,
family therapists are better able to help clients consolidate understanding of their use of nonverbal communications, and its effect on family members. A major goal for most couples counselors and marriage and family therapists is to simultaneously maintain both family unity and personal individualism. When they point out clients’ nonverbal communications, individuals learn about themselves and families learn about the members therein, meeting this goal of separate closeness.

Discrepancies

Family therapists also use nonverbal communications to notice and point out discrepancies in clients’ stories, feelings, and behaviors. For example, if a client is smiling while he or she talks about something unpleasant, the client is likely trying to mask hidden pain with a false veneer. The family therapist might say, “You are talking about a horrific event in your life, yet you are smiling. Let’s talk about the discrepancy between the content of your story and what you are trying to show you feel.” Using the nonverbal behavior to address the inconsistency between what the client is saying and what he or she is feeling is a crucial tool for the family therapist. The same thing occurs when the therapist notices a difference between what the client is saying and what he or she is doing. For example, if a client comes to couples counseling in order to repair his or her marriage but consistently shows up late to sessions, keeping the client’s partner and their couples counselor waiting, the couples counselor might say something like this: “You are telling me that you are invested in marriage counseling, yet you are showing up late to our sessions. I see a discrepancy between those two things and I want to know what you think. What’s your reaction to hearing this?”

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See also Clinical Case Conceptualization With Couples and Families; Clinical Interviews With Couples and Families; Communication Errors/Problems in Couples and Families; Communication in Couples and Families; Cultural Issues in Couples and Families; Empathy; Metacommunication

Further Readings


