

Nonverbal Communication Is The Major Indicator Of Normative Behavior Within Contextual Settings Notably Environments Of Anonymity And/Or Privacy: A Qualitative Observation

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Date of Submission: 05-08-2025

Date of Acceptance: 15-08-2025

I. Human Communication Settings

Within the brick-and-mortar settings of Human Communication, converge the rules, regulations, mores, customs, values, attitudes and beliefs of socialization designed to codify the behavior amongst willing and unwilling participants. This process of enculturation within and around self, is based upon societal prescriptions and expectations of preservation of mores within the socio-cultural environment. Through a culture's myths, values, attitudes, and beliefs, culture is perpetuated generation to generation. We pass down the behavior through verbal, vocal and nonverbal symbols – 3 V's.

Within these settings, there are a variety of Communication Arenas that are in place. I have modeled them into the Communication Staircase Model (CSM) to individually and professionally (within context) extract, examine, and encapsulate for the purposes of personal and social order. Behavior within context, interacting with self and others, examines the science and aesthetic of behaviors as they impact and engage participants.



Communication Staircase Model™ HCI

As the second step of CSM, Nonverbal Communication holds a special and very nuanced place in the realm of communicating with self and others. It is especially so because it plays a dominant role in ALL the other steps/arenas/settings. It speaks the loudest and most impacting on relationship. The Art & Science of Communication: Tools for Effective Communication in the Workplace, John Wiley & Sons, 2008, details CSM contextually introducing each step of the communication processes within any inhabited environment.

Institutional settings engage in population control, management, and environmental health regimes using a myriad of environmental rules, regulations and mores. These include privacy laws and clauses that protect client and provider. There is no disclosure to the general population of a clients/patients/offender's conditions of placement. The environment is designed that population members under care/observation do not "know" each other backgrounds, offenses, sentences, prognosis, diagnosis, etc. They know only the daily present/presence of each encounter with no preconceived awareness of who/what/why *others* except they inhabit a common space and share the commonality of cultural mores of right/wrong, good/bad, dangerous/safe, free/captive, etc.

Communication Environment:

All the mores of the institution are imbedded within its linguistic and behavioral dynamics and results in the *communication environment* designed for institutional results – which may or may not be functioning effectively. Behavior is communication and communication is behavior. This behavior surfaces in the verbal, vocal (paralanguage is the nonverbal nomenclature for vocalics) and nonverbal (3 V's) nuances of every culture

and its grouping. These behaviors are a part of each culture's enculturation processes generationally passed generationally for the preservation of the culture. The words, the vocal sounds, and the use of multi-layered use of body, space and time – all culturally learned and preserved.

Communicating Behavior: Dominance Of Nonverbal/Vocal Over Verbal

Think about a functioning institution with daily in-take and interaction, however, it does not provide the “usual” introductions of who, what, where, when, why such as introducing a new employee. Instead, you are more likely to meet your counterparts in the “yard” or in the “dining room” or “smoke break.” There may be a nod of acknowledgement, a blank or curious stare, or any number of nonverbal body postures/facial expressions or *kinesics*. A name of introduction may or may not be spoken for days or months. What this is revealing is that individuals are collectively sharing intimate space often without vital information concerning the make-up of other “clients” mental and emotional state. Physical capacity may or may not be completely clear. Customary introductions of “what do you do” or “what brought you here,” are completely bypassed. No one is coming forward to *other* with introductions that help determine where and how they should be placed within a person's mental framework. These environments are often dorm-like, close-contact, hyper-managed. There is a lot of verbal AND nonverbal interpersonal and small group connectivity unless individual(s) is isolated. Silence speaks volumes.

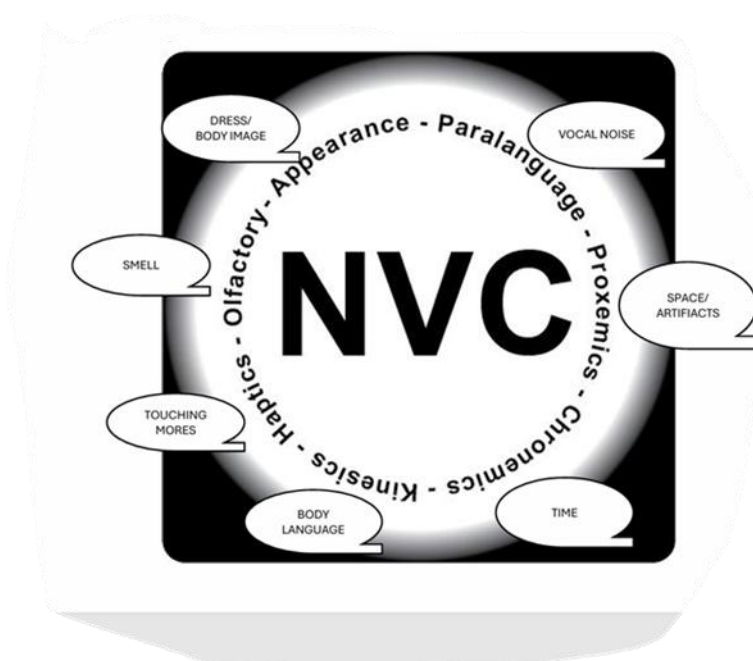
These environments serve as both a microcosm and macrocosm of Nonverbal Communication as the primary determinant of interactive understanding between individuals and amongst group members, this is true regardless of the homogeneous or heterogeneous fabric of the group.

Nonverbal Communication Examination Within Settings Verbally Silenced Exposé:

The Speech Communication discipline of Nonverbal Communication is often absent from course offerings, textbooks and writings as a stand-alone discipline of communication. I believe this to be reasoned due to its integration in all the other codes; however, it stands alone. There are academic and organizational entities that will offer classes or training, but not as prevalent as needed according to any data analysis of the role of these factors in determining outcome of everything communication! More behavioral “managers” within our social structures are being required to LEARN a variety of nonverbal behavioral responses from the heterogeneous spaces they are operating within. Hence, the 21st Century struggles of globalization.

This “first-person” experience/analysis details a probing interview with Matty after her release from a secured, guarded and managed facility for those needing or seeking respite from mental, physical or emotional disability/trauma/stress. She voluntarily committed to a short stay in lieu of pharmaceutical induced remedies. As a communication specialist, she used the opportunity to rest and examine the environment for its unique environmental framework of “verbal anonymity.”

The following diagram briefly introduces 7 nonverbal arenas that impact every communication setting, along with their abbreviated definitions.



Matty (*Patient Observer*) provided a behavioral social lens of the communication environment of the institutional residence. [Institutional place, names, specific medical conditions and concerns are presented in anonymity.] Understand, that all environmental awareness and the ability to relate to it, is embedded in the individual's ability to name it from the depth of its own behavioral perception – we each have our own residue/mental schemata.

We are all residents of our residue. *psthoughts*

Taking each of the nonverbal arenas, *patient* provided a clear snapshot of the nonverbal rules and regulations that governed acceptable versus unacceptable behavior based on environmental regulations. Additionally, socially accepted prescriptions that were carried individually into the institution remained steadfast in its personal legitimacy. So, everyone was behaving/operating internally within the codified norms of self and institutional mandates but mainly without verbal accompaniment. An example being an individual suffering from vertigo unbeknownst to those around them but periodically *loses balance suddenly* without disclosing their condition to those around them. It is the behavior that brings awareness and response, not the verbal discussion.

NOTE: Nonverbal indicators that “rule” the behavioral communication of settings of privacy, it is clearly a process of deduction that these factors are also the major determinants of ALL communication environment with based on socialized/enculturated rules, mores, socialization, formulation and codification. This includes ALL Human Communication both in terms of **TYPE** of communication – Communication Arenas of CSM – and the **CONTEXT/SETTING** or time/place/space of the interaction(s).

Examining messages/interaction from the primary lens of nonverbal cues clearly peels back the layers of enculturated norms expected of all societal participants no matter their position of socialized inheritance.

Nonverbal Communication Examination Within Settings Verbally Silenced

Patient observer nonverbal assessment is based in their personal interpretation of enculturated nonverbal codes as identified above and performed within their collective socio-cultural settings. These mores are based within Eurocentric American, patriarchal dominated cultural structures. Taking this experience from senses to memory to practice to paper, was one of the most in-depth first person experiences she ever endeavored through – *eyes wide-open*. Below are a few examples of each of the Nonverbal Arenas expressed vocally (nonverbal paralanguage) or through the other six identified codes, that most exemplified the proposition of nonverbal dominance regardless of verbal accompaniment.



APPEARANCE = acceptable body image, individual and collective physical/mental identification, and somatotype based on societal mores concerning attractiveness, approval and acceptance. These observances were not spoken of unless they were against dress codes or “caused” members of the community to be extremely uncomfortable. We are told moment by moment, “A picture is worth a thousand words” and “First impressions are lasting impressions.” Appearance highlights these U.S. American adages more than most of the NV variables. Some settings are more impacted than others such as in work and living environments where close proximity is required and a “meeting of the minds.” We are comfortable with our own level of comfort, especially appearance.

Observances:

1. Community members that were voluntarily admitted generally possessed their own clothes that became quite personal and sometimes an issue of confrontation when a “privileged” member had what another may want.
2. Disheveled and stained clothing, unkempt hair, problematic footwear, etc., were signs of the inability to manage personal care.
3. Attractiveness continued to be based in socially acceptable symmetry of facial and body features.

NOTE: This is often used a primary indicator for many assessments that are visual in nature when determining the “wellness” of an individual. Think about gauntness or swelling of the body, or clothing that is highly inappropriate for a particular setting.

PARALANGUAGE = Vocalics; *how you say what you say*. This includes a number of vocal nuances that are highly personalized and mainly a product of mimification© (the process of gathering identity). We have heard all our lives; “It’s not what you say, it’s how you say it!” An individual’s vocalics speaks volumes to those expecting, desiring to hear a common or comfortable tone and other noise factors – accent, dialect, pitch, intonation, rate, pacing, emphasis, stress, pronunciation, articulation, volume, projection, breath support and more. These are the vocal tools of speakers, singers, athletes, musicians. It also acts as necessitated vocal “punctuation.” In the U.S., *vocal noise* at culturally acceptable levels is expected. The lack of it hints at an absence of interactive involvement – the person is deemed a non-listener even if they are looking directly at the speaker. Nonverbal Communication is culturally bound.

Observances:

1. Silence was a common use of avoidance. Sometimes to the point of pretending *hard of hearing* so as not to engage.
2. Pacing and rate of speech were sometimes indicators of speech barriers, physical or emotional. She recounted a member that spoke at a rapid-fire rate moving from topic to topic with no transitions. Moving from one feigned listener to the next.
3. Volume and projection were often used as signs of great agitation. Outbursts alerted other members to clear an area. Not the words but the volume or who the loudness was directed to (*projection*). Loudness was often used as protection from real or imagined danger. This vocal noise is often accompanied with other NV signs of agitation.

PROXEMICS = Use of space and spatial relationships between people, including use of objects and artifacts within space. Think HGTV, Feng Shui, Color appeal and regulations such as traffic signals and ceremonies, office space, cubicles, etc. Additionally, **territoriality** is a major by-product of proxemics. Wars are fought and won based simply on proximity to the “enemy.” Households are often divided based on proximity of bed to bathrooms to kitchen to common spaces. In many institutional settings, proximity is a major indicator of permissible versus non-permissible behavior. “ENTER versus DO NOT ENTER.” Patient Observer stated that this Nonverbal code was a dominant factor in who did or did not interact, eat with others, “play” with others. Locked doors were often needed when behavior was not population friendly.

OBSERVANCES:

1. Community members were separated based on their classification of a “danger to self or others”. Patient Observer shared that there were several incidents early during her stay where Safety Officers were called to quash fights, walk “forensics” members to eating and communal areas, and consistently lock down areas of potential spill over. The main disconcerting aspect was that the facility was co-ed and increasingly became cordoned off to separate men from women. Observer stated there was an experience when an escalation resulted in a lockdown and she and another member were locked in a space accessible to the trouble. The Safety Officers took control with staff but it became increasingly common due to a couple of members that became enemies. This eventually separated men from women in most cases unless shower facilities were limited and men needed to be walked to **common showers**.
2. The rooms of community members were off limits to guest. Only roommates were allowed in the personal bedroom space. There were instances when arguments broke out for breach of territory especially when objects may be missing (real or imagined). Patient observer was accused of stealing a patient’s wig though there were no hair texture similarities or preferences. The accuser was terribly upset for most of the morning causing major community unrest til they calmed down as everyone kept skirting by their room trying to keep appropriate spatial distance. Objects and artifacts were very personal especially since some members were allowed to bring personal belongings including comfort items such as stuffed animals. There appeared to be institutional choices of space being made based on financial ability of community members.

3. Activities like eating, group dayroom activities, and entertainment opportunities were not well attended but attended tended to by members who did not mind sharing space or possibly being touched due to close proximity.

CHRONEMICS = Time constructs based in socio-cultural dimensions of being monochronic or polychronic in its outlook and implementation of time constructs. Time functions as the “cultural management system” including design and control of calendar appropriation, observances, past-present-future driven social structure, calendar observed rituals, and seasonal communal responsibilities. This factor drives the mental and physical activity of an environment internally and externally for the individual and the group. It is the Nonverbal code greatly affixed to competition and competitive sports. Also, the time management of family, group, society – culture.

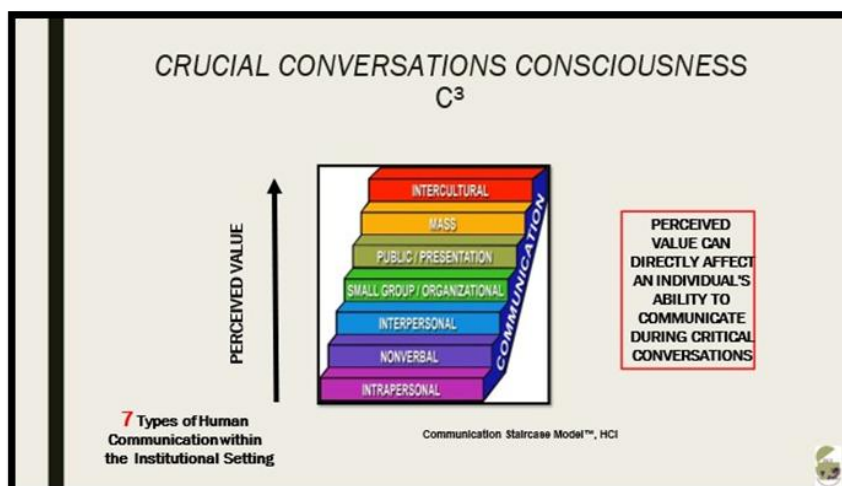
OBSERVANCES:

1. There was strict adherence to daily community routines from showering, to eating, to smoke breaks, to break-out sessions, to lights out. As such, most activities were not necessarily mandatory. However, all activities involving staffing set up/break down had strict time adherences which participant observer were often glitch-filled set-ups and overanxious community members (mainly during eating activities).
2. New community members quickly learned to observe the often-extreme pressure felt by staff and members to ready and eat communal breakfast, lunch and dinner. Meals were used as markers for time passing until the next meal. There was always a sense of anxiousness with a large number of community members where time was passed in incremental activities of pleasure or workshop encouragement.
3. The breaking of time structure often led to behavioral dissatisfaction with louder paralanguage and physical disturbance.

NOTE: The Seven Nonverbal Arenas intersect with one another throughout the interaction within the self and with others. None operate totally in isolation; however, domination of one over the other is consistently experienced based on communication environment.

KINESICS: “When I say the term Nonverbal Communication, what is the first thing that comes to mind?” The answers from audiences is overwhelming the same few – body language, facial expression, and maybe gestures. They are right. However, notice the question. **Most individuals one when asked for a definition of NV, this arena as the only one** they think about or are aware of, versus the other six that are as highly influential in all interchange and social structures. It goes along with appearance but stands alone as a mainly visual arena though there are members that are not sighted that use their bodies to exchange messages. Kinesics is a huge part of cultural relations due to the variety of body movement interpretations of millions within billions.

Body image is the multi-trillion-dollar industry across the board that it is. This factor also includes how U.S. culture looks at the issues of aging and the preference for youth, for some at all cost. No matter the environment, your stance, gestures, facial expression, micro expressions, eye contact, posture, walk are based in the cultural norms within all cultures. Body type is a common indicator of how a society values image. For instance, some have determined that a political figure of import should be tall in stature and pleasing to the eye. We often use indicators such as height to position our “value” in the communication situation. Think of the Euro-American adage “The bigger they are, the harder they fall.” Even in these types of institutional settings, under major and mandatory control are aware of the vying for power that goes on all setting of human interaction, no matter the type of communication.



OBSERVANCES:

1. Patient observer occasionally interacted with a member that dragged his legs along. This body condition, plus disheveled clothing and consistently focus on gathering food around him were consistent behavioral signs of neglect and/or inability. Many members of the community distanced themselves from others who appeared to have major physical challenges that may have impacted their cognitive abilities and/or responded with relationship “triggers.”
2. A variety of medical devices were used to support transportation of differently abled such as wheelchairs, walkers, hearing aids, crutches, stretchers. There was a lot of maneuvering of members to accommodate members that needed physical accommodations.
3. Body type (somatotyping) was still very much applied concerning those that were socially designated as nice-looking, nonattractive, etc. These attributes were at times exaggerated, hidden, nonverbal *cat & mouse* games and other socialized patterns of how body image and type dominates even in silence. Dominance or meekness was often determined by the size of body composition of members, men and women. This again made way for space to be dominated nonverbally (perceived value) by those capable of taking up more space due to their body type matters.



NOTE: The last two Nonverbal codes/arenas are major factors in U.S. American socialization mores. They both weigh heavily in what is considered acceptable and unacceptable behavior in public communication settings and sometimes behind private walls. They are also heavily considered when determining who is invited to the “party.” Haptics and Olfactory carry with them major considerations of comfort versus discomfort within enclosed environments/structures/neighborhoods and sometimes have serious implications upon cross-cultural relations. I personally can remember sitting on a New York bus rushing to grab the last seat. The passenger beside me abruptly jumped up and stood. Hmmm...I thought until after a couple of instances I realized it was the same type of religious male by recognition of garments. I avoided future potential touching contact. The other code was experienced often enough in the urban city setting of NYC when subway cars when empty out into the next due to odors from a passenger would displace passengers to the next car.

HAPTICS = Touching mores as codified by the dominant culture. *Who gets to touch who how?* #psthoughts This includes values, attitudes and beliefs that are based on political, religious, socioeconomic, ethnicity/heritage, territoriality, biological sex versus gender mores, and other cultural considerations determined by each cultures dominant ethnic group.

OBSERVANCES:

1. It was noted that touching mores (more than the other six codes) were the strictest and most quickly addressed when violated especially concerning physical contact. There was often the need for quick intervention whether a fight, mistaken but invasive touching, inappropriate touching of self or others, violating space by bumping into others.
2. Touching another member’s possessions, food, class materials, etc., without permission was taboo and could lead to penalty. Patient observer recalls an incident where a patient was touched by mistake when passing their mobile aid. Already having a difficult day, they lashed out vehemently at the “perpetrator” and had to be calmed down by staff even after the “offender” apologized profusely.

3. There were serious haptic structures concerning touching privileges such as those given permission to administer medicines even if by physical force if the staff deemed necessary. This was more overseen as an act of obedience whether the patient compliant or not. Compliance was a huge factor in members of the community meeting certain obligations. Failure sometimes resulted in having to be “managed” in a physically restraining or coercive manners.

OLFACTORY = Smell is a dominant cultural indicator of acceptable and/or preferable aromas/odors versus culturally offensive or less pleasurable. This covers a wide gamut of smell producing agents – body odor, internal and external environment (space), food, vegetation, toxic versus nontoxic odors, etc. These mores are especially sensitive in heterogeneous societies. Smell is a variant highly controlled by geography, topography, climate – how man interacts with her surroundings. Olfactory mores becomes a process of enculturation early in life maturation due to hygienic comfort levels and factors. Many U.S. American visitors have remarked of the sterile olfactory nature of most U.S. American environments, purposefully. We tend to mask smells conscientiously.

This is particularly apparent in settings where members do not always have control over their biological faculties. As in the experience of the Participant Observer, the entire community can often be aware of this. No verbalization needed except when staff intervened.

OBSERVANCES:

1. Very often, Appearance and Olfactory NV codes work closely together to reflect the message being submitted. An individual may “look” clean or dirty indicating some hygiene cultural awareness. Participant observer related an incident where community members were visibly and audibly disgusted by a member where “clean up services” were slow in coming. Smell is a major factor in ostracism in a community as introduced above. Think about homeless “communities” and the issues of cleanliness and smell.
2. The smell of cooked food was a trigger that aroused curiosity, taste buds, and often kinesics impatience. Participant Observer noticed when food smells were in the air but service delayed, there were intensified vocal and kinesics discomfort displayed.
3. Living quarters within the community were maintained as double-room arrangement. Odor control for the sake of peaceful coexistence, including the close proximity of the entire community, made monitored room hygiene mandatory. Room checks were minimalized to “concerns” due to short staff issues.

NOTE: Participant Observer observed that staffing issues were a consistent problem and cause for alarm when emergencies which impacted the Nonverbal Behavior of ALL members of the community. There was a lot of offset with treats, smoke breaks and other “distractions” or lock down when needful. Unfortunately, these experiences appeared to escalate based on external factors outside of the institution that people were privy to or brought with them to work.

Nonverbal Communication Observation Within Limited Verbal Settings Summary

The Participant Observer was clear that the socialization of Nonverbal Communication is dominant in its prescription to be the major communication factor in the transference of messages within self and transferred to others. In order to have order between ourselves, nonverbal codes must be agreed upon and adhered to by the majority. This process of *mimification* is experienced by all human beings during their formative years and continue to develop based on the variety of settings that influence their communication behavior in a culturally acceptable manner. It is the breaking of these mores that create major rifts in our relationships within family, community and other socialized groupings. The nonadherence to sanctioned nonverbal communication is often used as the major indicator of abnormal behavior that social structures deem non-permissible and as such, intervenable.

Members of this particular institutional setting had limited opportunity and permission to share personal information verbally. This first-person observation was a key step in my colleague’s determination to understand the relevance and importance of understanding this communication code. It’s one of trillions witnessed and responded to millisecond by millisecond as the world continues to experience momentous change in social structures and global relationships.

There are no testimonies or books combined that could begin to touch the enormity of verbal, vocal, and nonverbal social codes per civilization past, present. Face to face (f2f) is our best solution. Other synchronous mode such as facetime and other visual forms of support serve a clearer function. AI is as distant as our nearest galaxy to help us get closer in understanding and getting along. Unfortunately, the human obsession with speed, ego-preservation, immediacy and emotional contagion/transference/absence...

These issues and more permanently cement Nonverbal Communication as THE mode of expression that must be taught, shared, spoken about and adjusted around – acculturation [blending with the dominant mores

while mutually enriching the cultural environment of the organization] in a heterogeneous culture versus reliance on assimilation. The absence of the Nonverbal “onboarding” experience wherever, however, by whomever, must happen in the shared setting. Learning a language encompasses all the aspects of that language then we must layer and factor in the co-cultural dialects, accents, argots. This awareness put into action will save our communities – silent and audible. Communication is everything and everything is determined by its nonverbal accompaniment sometimes to the point of Nonverbal dominance as addressed by this unique and important insider’s viewpoint.

Authors, Matty X, Participant Observer
P. S. Perkins, Recorder and Editor, With Permission

Suggested Reading List For Further Studies

- The Art and Science of Communication: Tools for Effective Communication in the Workplace, P.S. Perkins, Wiley Publishers, 2008
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