

■ Original article

Nurses' communication skills in military hospitals

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Abstract

Background and Purpose: Communication has become a core topic in nursing care and investigations on this topic could have a significant impact on increasing nursing quality services. The present study aims to evaluate the communication skills and nursing staff component focusing on emotional management, others' perception and self-expression.

Methods: This is a cross-sectional descriptive-analytical study to determine the communication skills of military nursing staffs in Tehran, elected in 2013. 340 staff nurses working at internal medicine, surgery, intensive care unit (ICU) and emergency were enrolled. Data were gathered using a designed questionnaire and by using SPSS 18 and Chi-square analysis. Validity and reliability testing using alpha-Cronbach has been obtained 0.66.

Results: 52.1% of the participants were women. The mean age was 35.29 (± 7.5) and the mean score of communication skill was 116.14 (± 9.43). Between communication skills & the variables of age, education, nursing responsibilities, there was a significant correlation ($P < 0.05$). The relationship between communication skill and components (emotional management, others' perception, self expression) was positive and significant ($p < 0.001$).

Conclusion: The communication score in this study was average. Therefore, in order to promote efficiency and improve care quality, encouraging the employees to utilize these skills and monitoring this execution and also developing short term courses with the subjects as emotional management, others' perception, and self-expression, in the communicative skills are recommended.

Keywords: Communication, Emotions, Perception, Expression, Nursing

Introduction

Communication in the healthcare organization is the key for care quality, patient safety and financial performance. It requires a professional relationship between the nurses, the clients, the relatives and other healthcare staff including physicians and nurses (1). Effective communication is an integral component of nursing empathy and refers to the ability to perceive and share the feelings of the clients and the ability to communicate with them. It also is an empathic response to clients' emotions

and needs; however, opinions on endorsement were lower when patients disagreed with health care professionals (2). Communication consists of two types: verbal and nonverbal. The non-verbal includes body language (about 59%) and tone of voice (about 41%), although both types of connections are simultaneously done, about 90% of non-verbal communication is included (3). In the nursing profession, nursing is the art of communication and communication skills help the

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nurse to maintain effective relationships and professional standards in all legal, ethical and clinical areas (4). Through creating communication, the nurses diagnose the patients' problems and needs and adjust the treatment plan. By creating effective communication, the patient feels secure and trusts the management team. Therefore, effective communication is largely considered as a key indicator for satisfaction, collaboration, and curing sick people. The ability to communicate effectively with others is the heart of the patient's care, thus the ability to communicate with the patient is one of the requirements of nursing profession (5). These skills are required in all nursing care during special circumstances such as serious illness, and end of life care is particularly important (6). Regarding to their close relationship with the patients especially in critical periods of time, the nurses have an important role in changing the patient's perception towards the disease and monitoring it with making efficient and effective connections (7). This skill, like other skills in the nursing profession requires a lot of training and practice (8). Effective communication and the quality of patient care are the necessary conditions for effective relationship that create the sense of closeness with the patients and increase the nurses' job satisfaction (9). In Farmahini's study on the effect of training the communication skills to the nurses, she concluded that instructing these skills improved patient's satisfaction (10). Despite the effectiveness of communication skills on nursing services, improving the patient care and patient participation, unfortunately, doctors and nurses lack sufficient communication skills. This resulted in neglecting the patients' needs and demands (11). In the Nasiri study on the nurses' relationship with the patients quote from Kabiri that nurses did not have enough verbal and non-verbal communication with the patients and they also spend very little time on establishing relationship with their patients (12). Since the patients displayed increased satisfaction with the quality of health care,

communication skills training courses have been conducted completely (13). Studies on this topic could have a significant impact on boosting nursing quality service; therefore, the present study investigated the communication skills and its component among the nursing group from the nursing staff perspective.

Materials and Methods

This was a cross-sectional descriptive-analytical study in order to determine the communication skills of military nursing staff. Study subjects included 340 nurses staffs (assistant nurses and other graduate nursing) working in internal medicine, general surgery, ICU and emergency wards of military hospitals affiliated with Baqiyatallah University of Medical Sciences selected by random sampling. The necessary data were collected using a questionnaire and then were analyzed. The questionnaire included the demographic data and the questionnaire of communication skills test was based on the research Institute for the Behavioral Sciences (14). The questionnaire included 34 questions and based on 5-point Likert spectrum and three components of communication skills covering emotions' management, others' perception, & self expression have been assessed. 12 questions dealt with "emotions management" and also (12 questions) dealt with "others' perception" and (10 questions) dealt with self-expression. The overall test (34 questions) determined the score of communication skills. The subjects were asked to mark their answers to each question from 1-5: 1 was the "lowest" or "completely disagree" and 5 was as the "highest" or "completely agree". For each one of the respondents, distinct scores were estimated for each of these components. In addition, the sum of the scores gave a total score that represented communication skills of the participants. Therefore, the range of the scores varied from 34 to 170 for each person.

To determine the questionnaire's reliability and validity, after being edited by the fellow researchers

and the consulting statisticians, the questionnaire was reviewed by 12 board members of Baqiyatallah faculty of Nursing in terms of the content and face validity. The comments helped the researchers to confirm the revised version. To verify the questionnaire's reliability, the internal consistency was calculated using alpha-Cronbach ($\alpha=0.66$). 340 responses to 410 questionnaires were sent out to the subjects. Data were analyzed using descriptive indices and the Chi-squared test, Pearson correlation coefficient, and SPSS 18 was used for statistical analysis.

Ethical Considerations: This study was approved by the Ethics Committee of Baqiyatallah University of Medical Sciences, Tehran, Iran. The questionnaires were anonymous and the participants' information was collected privately by the researchers. The participants signed the written informed consent for voluntary participation in the study before completing the questionnaires.

Results

The results revealed that 52.1% of the participants were female with mean age of 35.29 (7.5) and 23.6%, with associate degree education, 70.9% with B.D degree, 5% were M.S and 1.5% had PhD in Nursing (Diagram 1) and the mean patient number was 17.82 (7.44), internal department had the highest participation with 39.9% of the participants (Table 1).

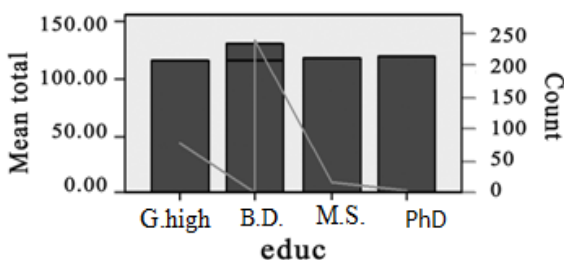


Diagram 1. Relationship education and mean score of communication skills test.

The present study derived results showed that 79.7% the participants were familiar with

communication skills and 32.9% of the participants responded that they used these skills. Considering the total test score, the mean of the test [116.14(± 9.4)] showed that the communication skills were at an average level. Also the mean and standard deviation of communication skills components such as emotions management, others' perception and self-expression have been defined by separation (Table 2). In addition, Pearson correlation coefficient between the components of the test showed positive and significant correlation ($P<0.05$) confirming the existence of the factors (Table 3). In this survey, out of the demographic variables, communication skills have been significantly associated with age and the highest score belonged to 35 years old in terms of age (Diagram 2).

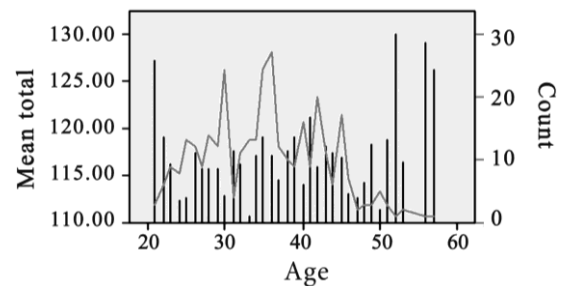


Diagram 2. Relationship between age and mean score of communication skills test. Data were analyzed using descriptive indices

In assessing the other demographic variables, including gender, marital status, the duration of service, the knowledge of communication skills, history, income, interest rates in nurses, and hospital type, no significant relationships were observed with communication skill test. Responsibility in nursing and emotions management, employment status, age, department, working shift, experience, familiarity with communication skills were significantly correlated with communication skills. Others' perception was correlated with gender, marital status, age, responsibility in nursing, education and self-expression with age, working shift have been significantly associated with the use of communication skills ($p<0.05$).

Table 1. the relationship between the demographic characteristics and testing components rate.

Data were analyzed using descriptive indices and the Chi-squared test

Statistic Index	Distribution		Emotions management		Others' perception		Self expression		Total test		
	Statistically significant	%	Mean	SD	Mean	SD	Mean	SD	Mean	SD	
Gender	Male	163	47.9	42.07	4.62	42.22	4.71	31.11	3.63	115.41	8.91
	Female	177	52.1	42.43	5.11	43.23	4.79	31.14	3.32	116.81	9.87
Educational Level	Diploma	77	6	40.98	5.49	43.57	5.20	31.03	3.72	115.59	10.28
	Bachelor	241	70.09	4.54	4.69	42.45	4.61	31	3.42	116	9.28
	MA	17	5	4.23	4.22	43.47	4.27	32.05	2.74	11876	7.84
Department	PhD	5	1.5	42.2	3.63	40.40	3.78	34.80	2.28	119.40	6.94
	Internal	135	39.9	42.71	42.49	42.67	4.50	31.38	3.47	116.77	9.46
	Surgery	100	29.6	41.66	4.72	42.56	5.07	30.38	3.58	115.07	8.92
	Emergenc	24	7.2	41.66	5.23	41.20	4.61	30.82	3.43	113.70	9.78
Age	ICU	79	23.4	42.44	4.95	43.62	4.80	31.18	3.83	117.25	9.92
	35.29 Mean	340	100	43.37	5.67	44.12	5.20	31.62	4.07	119.22	10.89

Table 2. the Statistic Index related to the results of the test component communication skills.

Data were analyzed using descriptive indices

Statistic Index	Emotions management	Others' perception	Self-expression	Total test
Mean	42.26	42.75	31.12	116.14
Median	42	42	31	115
Mode	38	39	30	115
SD	4.88	4.76	3.47	9.43
Variance	23.87	22.65	12.06	89.1
Range	28	27	21	54
Minimum	27	30	21	90
Maximum	55	57	42	144

Table 3. the Correlation coefficients between the test components communication skills.

Data were analyzed using Pearson correlation coefficient

Test components	Emotions management	Others' perception	Self-expression	Total test
emotional management	////////////////////	P=0.000 r=0.425	P=0.000 r=0.239	P=0.000 r=0.82
others' perception	P=0.000 r=0.425	////////////////////	p= 0.145 r =0.79	p=0.000 r=0.754
Self Expression	P=0.000 r=0.239	p= 0.145 r =0.79	////////////////////	P=0.000 r=0.532
Total Test	P=0.000 r=0.82	P=0.000 r=0.754	P=0.000 r=0.532	

Discussion

In the present study, the mean score of 116.14 with S.D 9.43 that compared with the test reference demonstrates communication skill at an average

level. The findings of this study are in line with those by Hemmati (2004) in a research on assessing the communication between senior nursing students

and nursing faculty clients of Oromie University that revealed an average communication score (15).

Despite the knowledge of good communication as a precondition for optimal care and treatment in health care, serious communication problems are still experienced by patients as well as by health care professionals (13), and effective communication is a vital component of nursing care; however, nurses often lack the skills to communicate with the patients and other health care professionals. Therefore, Communication skills training programs are constantly recommended (16).

The results of the present study demonstrated that the participants were acquainted with communication skills and they used these skills in caring the patients. This group of the participants also had a higher score (116.6 with SD 9.49). It is obvious that establishing an efficient connection takes place when nurses employ the skills they have been taught. According to Heaven et al. (2006), many of the nurses are familiar with communication skills; however, they are unable to use them in practice (17). Therefore, clinical supervision along with supporting the nurses can improve their efficiency.

Also in this study, the mean score of the female participants was higher than that of the male ones but this difference did not reach to the significance level. It seems that non-significant difference in the communication skills between the two genders was due to the homogeneity of the participants attending the study and also that similar learning opportunity was provided for both genders. Therefore, similarity in communication skills among the genders was normal. However, these findings are in disagreement with some previous investigations indicating gender as one of the effective variables on communication skills (18). There was a significant correlation between age and communication skills ($p < 0.05$) which was not in line with Hookers' (2005) study that mentioned there was no significant correlation between communication skills and working

experience (19). Among other findings in this study, emotions management and communication skills were significantly correlated to communication skills, therefore the communication skills contribute, among other things, in emotional intelligence, i.e. personal capabilities and capacities of an individual in understanding and recognizing their own emotional states and those of others, as well as coping with emotional states of others which, in spite of the common opinion, may be trained and developed (20).

Conclusion

These results are useful in many aspects of nursing including: management, education, research and clinical nursing. These results revealed that communication skills scores and their components as emotional management, others' perception, self-expression were at average level. These scores are not acceptable and require commendatory and supervisory programs in different levels in order to improve and increase the quality of nursing services in all nursing groups by management and authority. It is recommended that these courses be included in short term and long term ones based on age, education level, nursing responsibility, improving communication skills and its components and appropriate program design.

Conflict of interests

The authors declare that they have no competing interests.

Author's Contributions

H.R Gholami was involved in the study conception, design and analysis/interpretation of data, critical revisions for important intellectual content and review of content. F. Sarhangi was in charge of the data acquisition, analysis/interpretation of data, drafting of the manuscript and reviewing the content. Javadi was responsible for the

critical revisions of the important intellectual content and content review. Dr. J. Mokhtarinori provided the statistical technical support.

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References

1. Ward J, Cody J, Schaal M, Hojat M. The empathy enigma: an empirical study of decline in empathy among undergraduate nursing students. *J Prof Nurs*. 2012; 28(1): 34–40. PMID 22261603.
2. Shamay-Tsoory SG, Aharon-Peretz J, Perry D. Two systems for empathy: a double dissociation between emotional and cognitive empathy in inferior frontal gyrus versus ventromedial prefrontal lesions. *Brain*. 2009; 132(Pt 3): 617–27 PMID: 18971202.
3. Roberts L, Bucksey SJ. Communicating with patients: what happens in practice? *Phys Ther* 2007; 87(5): 586-94.
4. Potter P, Perry A. *Basic Nursing: Essentials for Practice* 7th ed St.Louis: Mosby Elsevier; 2007.
5. Chant S, Jenkinson T, Randle J, Russell G. Communication skills: some problems in nursing education and practice. *J Clin Nurs* 2002; 11(1): 12-21. PMID: 11845748.
6. Casarett DJ, Quill TE. "I'm not ready for hospice": strategies for timely and effective hospice discussions. *Ann Intern Med* 2007; 146(6): 443-9 PMID: 17371889.
7. Johnston B, Smith L. Nurses' and patients' perceptions of expert palliative nursing care. *J Adv Nurs*. 2006; 54(6): 700-9. PMID: 16796662.
8. Dahlin C. Communication in palliative care: an essential competency for nurses. In Ferrell B, Coyle N, editors. New York: Oxford University Press. 2010.
9. McGilton K, Irwin-Robinson H, Boscart V, Spanjevic L. Communication enhancement: nurse and patient satisfaction outcomes in a complex continuing care facility. *J Adv Nurs*. 2006; 54(1): 35-44. PMID: 16553689.
10. Farmahini Farahani M, Kashaninia Z, Hosseini MA, Biglarian A. Impact of Training Communication skills to nurses on patient s' satisfaction with nurse-patient relationship. *Iran J Nurs Res* 2007; 1(3): 47-54 [Persian].
11. Boyle DK, Miller PA, Forbes-Thompson SA. Communication and end-of-life care in the intensive care unit: patient, family, and clinician outcomes. *Crit Care Nurs Q*. 2005; 28(4): 302-16. PMID: 16239819.
12. Nasiri M. Study of obedience of nursing-patient relationship principles from the viewpoints of patients and nurses. *Iranian Journal Of Nursing & Midwifery Research* 2005; 28(3): 84[Persian].
13. Nørgaard B, Ammentorp J, Ohm Kyvik K, Kofoed PE. Communication skills training increases self-efficacy of health care professionals. *J Contin Educ Health Prof*. 2012; 32(2):90-7. PMID: 22733636.
14. Tabatabai H, Investigate the relationship between couples with marital communication skills. Allamh Tabatabai University. [Master degree thesis]. 2011 (Persian).
15. Hemmati maslakPak M, Khalilzadeh H, Rahmani A. Study Of Communicative Skills Of Nursing Senior Students Urmia Faculty of Nursing and Midwifery in 2003. *J Urmia Nurs Midwifery* 2004, 2(1). (Persian).
16. Wloszczak-Szubzda A, Jarosz MJ. Professional communication competences of nurses -- a review of current practice and educational problems. *Ann Agric Environ Med*. 2013; 20(1): 183-8. PMID: 23540236.
17. Heaven C, Clegg J, Maguire P. Transfer of communication skills training from workshop to workplace: the impact of clinical supervision. *Patient Educ Couns*. 2006; 60(3): 313-25. PMID: 16242900.
18. Brunero S, Lamont S, Coates M. A review of empathy education in nursing. *Nurs Inq* 2010; 17(1): 65-74.
19. Hooker RS, Ciper DJ, Skescenski E. Patient satisfaction with physician assistant, nurse practitioner, and physician care: A national survey of Medicare beneficiaries. *JCOM*. 2005; 12(2): 88-92.
20. Tropea S. 'Therapeutic employment': a new paradigm to explore the interaction between nurses and patients with a long-term illness. *J Adv Nurs* 2012; 68(4): 939-47. PMID: 22050330.