

Assessment Of The Language And Therapeutic-Communication Issues Among Student Nurses

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Abstract

Objective: A descriptive study focused to appraise the language and therapeutic-communication issues in health care practices among student nurses. Evaluate the effectiveness of structure teaching programme on language and therapeutic-communication skill. To establish the association between language and therapeutic-communication issues with selected socio demographic variables among student nurses.

Method: Current study research approach used was pre-experimental with one-group pre-test post test design. Total 360 participants were selected by using convenient sampling technique. Global interprofessional therapeutic-communication scale (GITCS) was used to collect the data regarding the language and therapeutic-communication issues among the participants. Data was analyze by descript and inferential statistics.

Result: The study resulted that out of 360 students of B.Sc. Nursing and GNM students maximum 98.9% (356) were 18 to 24 years of age and 92.8% (334) were female. According to State wise distribution it shows that majority of participants were belongs from Odisha 65.6% (236) and 32.2% (116) participants were from west Bengal. The majority of samples were B.Sc. students that is 64.2% (231) and maximum 32.8% (118) students were in 2nd year, whereas 27% (98) students were in 1st year, 23% students were in 4th year and minimum 17% students were in 3rd year. The Present study reported that majority of students 35%(126) had average, 34.72% (125) had poor, 11.11% (40) good, 15.28%(55) and 3.89%(14) had excellent therapeutic-communication skill. After the teaching session in post test report it was recorded that majority of students had 43.89% (158) good communication skill, 36.67% (132) had very good, 9.72% (35) were in poor, 6.11% (22) had excellent, 3.61% (13) had poor communication skill. The z-test was applied to find out the effectiveness of teaching modue. The calculated z-value was 24.32 which was greater than the tabulated z-value at p<0.05 level of significance. So, the teaching session was effective. Chi-square association showed language and therapeutic-communication issues were statistically significant with age, state, nursing profession, current year in the profession, other professional degree

at p-value 0.05 level of significant where gender and highest degree of education before joining nursing is not statistically significant, as P value is greater than 0.05 level of significance.

Conclusion: Therapeutic communication is an important aspect of health care delivery system. Patients and family members can achieve positive health outcomes from health care delivery system by this skill. Because of poor interaction between student nurses and patients, researcher suggested to develop a regular structure module for student nurses. Also suggested that, therapeutic communication should be included their curriculum.

Keywords- *language and therapeutic-communication issues, Global interprofessional therapeutic-communication scale, Health care practices and student nurses*

INTRODUCTION:

Therapeutic and effective communication is very important and key aspect in a nursing career.¹ A correct and effective interpersonal communication allows each patient to feel in the focus of clinical procedures thus to be the co-decision maker. Such approach is particularly significant in the case of hospital procedures that are unclear and unknown to the patients. That is why, the sense of security and trust that can be created by medical personnel is of great importance to the patients.² Nursing is a caring profession and they work as the frontline warriors of health care delivery system. Nurses are working with a multidimensional manner with each type of consumers from neonate to old age people to fulfil each aspect of holistic care. It is an essential task for a nurse has to develop communication skills both verbal and non verbal along with technical skills of profession.³ The aim of the therapeutic-communication is to develop empathy towards patient's health condition and their well-being.⁴ Through the therapeutic-communication the nurses adopt techniques to interact with patients within the clinical setting which is an important part of their work during delivering healthcare to patients.⁵ Therapeutic-communication is the key component of nursing profession. The nurse educator and nursing supervisor has to demonstrate the necessary instruction regarding therapeutic-communication to student nurses.⁶ To develop the therapeutic-communication skill among nursing students is essential duty of the faculty members. Although therapeutic-communication is a fundamental part of nursing education, its various attributes have not been clearly determined in nursing literature.⁷ Therapeutic-communication is a meaningful interaction among patients or family member and health care professionals which helps to achieve positive health outcomes. There is a pressing need for researcher to examine factors influencing for effective therapeutic-communication in relation to patient-centered care and increased satisfaction towards nursing care.⁸ Many studies conducted in Asian countries like Iran, China and some European countries such as the UK and USA have shown the Nursing students has somehow lack of interest and inadequate therapeutic-communication with patient and family members during their training period as they are very new to profession. But they should be required to establish effective interactions with patients to deliver holistic and quality care. Due to lack of time the nurses and nursing students maintain superficial relationship with the patient and not providing psychological care. Nursing students need to gain a deep knowledge about the therapeutic-communication which provides them the information necessary to help to connect with patients therapeutically. In nursing education as well as clinical instructors may provide more emphasis on therapeutic-communication in the educational curriculum.⁷ So, from above reason the researcher wants to conduct a study on nursing students of B.Sc. nursing and

Diploma in nursing students do develop a language and therapeutic-communication skill to provide a holistic care to the patient and family members.⁸

MATERIAL AND METHOD

In this study sample were the student nurses of a selected nursing college, Bhubaneswar, Odisha. The sample size was 360 student nurses. In the present study pre-experimental research-approach with one-group pre-test post test design was used. The convenient sampling technique was used to collect data. The independent variables were language issues and therapeutic-communication issues and the demographic variables are age, gender, education, experience, states, current years. In the present study convenient sampling techniques is used. Data were collected by modified **Global interprofessional therapeutic-communication scale (GITCS)**. This scale was modified into six category that is “**Self-confidence**”, “**building trust with patient**”, “**active communication**”, “**communication skill**”, “**patient concern**”, “**identify potential barrier**” during communication and therapeutic procedure in clinical setting. The scale designed in a Likert scale rating format which, ranges from lowest score never to highest score always. Along with it, not applicable(N/A) also included when the situation was not expected. Ranking system: Never (1) = “when the described behavior is not observed” Rarely (2), sometimes (3), usually (4) and always (5) = “consistently observed behavior”. The lowest score of the scale was 28 and highest was 140. Score less than 40% consider as poor communication, (40-50)%=fair, (50-60)%=good, (60-80)%= very good, more than 80% was consider as excellent communication. The aim of the scale was to support students, and health professionals in the summative and formative assessment of therapeutic-communication during clinical practice. The tool was validated by 5 experts from various fields of nursing and statistics. Reliability was established by using Chronbach’s formula and found to be 0.76 which indicates reliable. A pre test was conducted before the training session on therapeutic-communication and language skill. After training session post test conducted by the modified **Global interprofessional therapeutic-communication scale (GITCS)**. The data collected and analyzed by descriptive and inferential statistics.

Result:

Major finding of socio-demographic variables (Table no.-01)

In the present study age of the sample reveals that maximum 98.9% (356) were 18 to 24 years of age and minimum 1.1% (4) are between the age of 25 to 30 years. Majority of sample that 92.8% (334) were female. According to State wise distribution it shows that majority of participants were belongs from Odisha 65.6% (236) and 32.2% (116) participants were from west Bengal. The majority of samples were B.Sc. students that is 64.2% (231) and maximum 32.8% (118) students were in 2nd year, whereas 27% (98) students were in 1st year, 23% students were in 4th year and minimum 17% students were in 3rd year.

Finding related to frequency and percentage distribution of language and therapeutic-communication issues before and after intervention (Table no.-02)

The Present study reported that majority of students 35%(126) had average, 34.72% (125) had poor, 11.11% (40) good, 15.28%(55) and 3.89%(14) had excellent therapeutic-communication skill. After the teaching session in post test report it was recorded that majority of students had 43.89% (158) good communication skill, 36.67% (132) had very good, 9.72% (35) were in poor, 6.11% (22) had excellent, 3.61% (13) had

poor communication skill. So after the teaching session, there was improvement in therapeutic-communication skill among the students.

Finding related to Effectiveness of structure teaching programme by z-test result: (Table no.-03)

In the Present study the calculated z-value was 24.32 which was greater than the tabulated z-value at $p < 0.05$ level of significance. So, it reveals that the language and therapeutic-communication skill training was effective and there was improvement of knowledge of students on it.

Analysis of data related to Association between language and therapeutic-communication issues with selected social demographic variables among student nurses (Table no-03)

Association between language and therapeutic-communication issues with selected socio demographic variable was assessed by using chi square test. Age, state, nursing profession, current year in the profession, other professional degree is statistically significant with p-value less than 0.05. Hence they have a significant association with language and therapeutic-communication issues and selected demographic variables. Gender and highest degree of education before joining nursing were not significant, since the p-value > 0.05 . So, there was no-association among gender and highest degree of education before joining nursing with language and therapeutic-communication skill.

Discussion

In the present study the majority of students were 98.9% (356) in 18 to 24 years of age, majority of sample that 92.8% that is 334 were female. The calculated z-value also greater than the tabulated z-value. Therefore, the teaching on language and therapeutic-communication skill was effective to improve the communication skill among students. There was a significant association among age, state, nursing profession, current year in the profession, other professional degree with language and therapeutic-communication issues as p-value was more than 0.05 in chi-square test. The current study was supported by the research conducted in Turkey on communication training among nurses to develop empathetic skills among them towards the sick. After the training programme post-test scores was increased from 155.6 to 180.5, and it was fruitful for developing nurse's skills with regard to all variables ($P < .05$). There was no poor knowledge, negative attitude and poor skill among nurses in therapeutic-communication after the teaching programme.³

Conclusion

For nurses it is very much important to know language and therapeutic-communication skill. So that health education regarding this will be provided to the student nurses those are facing problem in clinical setting. Language and therapeutic communication is a meaningful interaction between members of health care team with patients or family members that helps to achieve positive vibes and self confidence in both nurses and client. Because of inappropriate and poor therapeutic-communication skill among student nurses the researcher suggested that there should be regular training programme to improve the health of the patient, family members and community.

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Ethical statement: This study was approved by the institutional ethical committee and a prior consent was taken from the student before collection of the data.

Conflict of interest: the researcher has no conflict of interest during conduct of this study.

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Table no.-01: frequency and percentage distribution of socio-demographic variables

N=360

Demographic variables		Frequency (f)	Percentage (%)
Age (in completed years)	18-24	356	98.9
	25-30	4	1.1
	Above 30	0	Nil
Gender	Male	26	7.2
	Female	334	92.8
State	Odisha	236	65.6
	West Bengal	116	32.2
	Others	08	2.2
Professional course admitted	GNM	129	35.8
	B.Sc. Nursing	231	64.2

Current year in the professional course	1 st year	98	27.2
	2 nd year	118	32.8
	3 rd year	60	16.7
	4 th year	84	23.3
Highest degree of educational qualification	Higher secondary education	329	91.4
	Graduation	29	8.1
	Other professional degree	02	0.6

Table no.-02: frequency and percentage distribution of language and therapeutic-communication issues

N=360

Language and therapeutic-communication issues	Pre test score		Post test score	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage(%)
Poor (Less than 40)	125	34.72	13	3.61
Avarage (40-50)	126	35	35	9.72
(Good) 50-60	40	11.11	158	43.89
Very good (60-80)	55	15.28	132	36.67
Excellent (More than 80)	14	3.89	22	6.11

Table no.-03: Effectiveness of structure teaching programme on therapeutic and communication skill

N=360, P<0.05

Language and therapeutic-communication score	Mean	Standard Deviation	Mean Difference	Z -value	Significance
Pre-test score	56.62	3.82	16.6	24.32	Statistically Significance
Post test score	73.22	4.12			

Table no-04: Association between language and therapeutic-communication issues with selected social demographic variables among student nurses

N=360

Sl. No	Socio-demographic variables	Chi square value	Df	P value	Inference
01	Age	116.8184	2	Less than 0.0001	Extremely statistically significant
02	Gender	0.071866	1	0.7913	Not statistically significant
03	State	56.61974	2	Less than 0.0001	Extremely statistically significant
04	Nursing profession	203.3958	1	Less than 0.0001	Extremely statistically significant
05	Current year in the professional course	150.9227	3	Less than 0.0001	Extremely statistically significant
06	Other professional degree	18.25345	1	Less than 0.0001	Extremely statistically significant
07	Highest level of education before joining nursing	1.797608	2	0.4086	Not statistically significant

Figure no.01: pre- test and post- test score (%) of structure teaching programme on language and communication

