

Original Article

Knowledge, Attitude and Practice of Nurses Regarding Therapeutic Communication at Tertiary Care Hospital

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ABSTRACT

Background: Effective communication in healthcare settings is pivotal for enhancing patient outcomes and fostering a cooperative environment between patients and healthcare providers. Therapeutic communication specifically plays a crucial role in establishing a rapport between nurses and patients, which can significantly impact the quality of care provided.

Objective: The study aimed to evaluate the knowledge, attitudes, and practices of nurses regarding therapeutic communication within tertiary care hospitals in Lahore, identifying areas for potential improvement.

Methods: A descriptive cross-sectional study was conducted over nine months using a validated questionnaire to assess the knowledge, attitudes, and practices of nurses. A total of 154 nurses were randomly selected using Slovin's formula for sample size determination. Data collection involved demographic and professional experience details, followed by specific questions on therapeutic communication. The Statistical Package for the Social Sciences (SPSS) Version 25.0 was utilized for data analysis, employing descriptive and inferential statistics to interpret the data.

Results: The results showed that 33.1% of nurses exhibited low knowledge levels, 39.0% moderate, and 27.9% high knowledge about therapeutic communication. Regarding attitudes, 57.1% of nurses displayed a positive attitude while 42.9% had a negative attitude towards therapeutic communication. In practice, 61.7% of nurses demonstrated good practice of therapeutic communication, whereas 38.3% displayed poor practices.

Conclusion: The study concluded that while there is a moderate understanding and positive attitude towards therapeutic communication among nurses, significant portions still require further training and improvement. Enhanced educational programs focusing on therapeutic communication could bridge existing knowledge gaps and refine practices, thereby improving patient care outcomes.

Keywords: Therapeutic Communication, Nurse-Patient Relationship, Tertiary Care Hospital, Healthcare Communication, Nursing Education, Patient Outcomes.

INTRODUCTION

Communication, defined as the transmission of messages from a sender to a recipient, has myriad advantages in both personal and professional contexts, including problem-solving capabilities, the sharing of joy, and the ability to exert control over situations. These communication skills are particularly critical in healthcare environments where they can significantly influence outcomes (1). Therapeutic communication, which involves meaningful, ongoing interactions within an atmosphere of mutual respect and trust, allows nurses and patients to collaborate effectively. It is designed not only to facilitate the exchange of verbal and nonverbal messages but also to foster relationships based on mutual confidence and cooperation (2).

Therapeutic communication is essential for allowing patients to express thoughts and emotions and for nurses to demonstrate acceptance and respect. Such communication practices are considered a crucial component in enhancing the quality of healthcare and are integral to nursing practice (3). The interaction entails active listening to both the verbal and nonverbal cues of patients, and effective observational skills enable nurses to assist patients in articulating their feelings. Techniques such as touch, which conveys

care, and the use of silence, which provides patients with space to think and gain insight, are among the most effective strategies in therapeutic communication (4).

The proficiency in therapeutic communication is vital for all healthcare professionals to better understand their patients and to encourage them to share their thoughts and feelings. Recognized as a standard of nursing care, effective therapeutic communication is necessary to improve patient trust and treatment outcomes. The outward demeanor of healthcare providers, including their speech patterns and temperaments, often acts as the initial therapeutic measure (5).

A positive attitude towards therapeutic communication on the part of nurses can greatly assist patients in coping with stress, enhancing patient satisfaction, and improving health outcomes, especially for those with chronic illnesses (6). Conversely, ineffective therapeutic communication can result in anxiety, misdiagnoses, decreased patient participation in their treatment, and poorer quality of health outcomes (7). Often, patients may avoid discussing their ailments due to an unfavorable hospital environment and may exhibit reliance on nurses for emotional and informational support, a need that goes unmet in cases of inadequate nurse-patient communication, which may be compounded by staffing issues and the personal anxieties of patients (8).

This study focuses on the gaps in understanding and practice among nurses regarding therapeutic communication within a tertiary care hospital setting. Despite its recognized importance, there is a scarcity of research conducted in this area, particularly in regions like Pakistan. Exploring this topic is crucial as therapeutic communication is arguably one of the most essential skills that nurses can possess to foster trust and connection with patients. The aim here is to assess the knowledge, attitudes, and practices of nurses towards therapeutic communication to inform future research and strategies aimed at enhancing these elements, thus promoting healthier nurse-patient relationships. The significance of this research lies in its potential to aid nurses facing communication challenges in hospital settings, providing insights that could lead to more effective therapeutic interactions and, consequently, better patient health outcomes.

MATERIAL AND METHODS

A cross-sectional study design was utilized to assess the knowledge, attitudes, and practices of nurses regarding therapeutic communication at a tertiary care hospital, chosen for its relatively large number of patients and nurses compared to other healthcare facilities. The study was conducted over a nine-month period. The sample size of 154 nurses was determined using Slovin's formula and targeted through a simple random sampling technique to minimize selection bias and enhance the representativeness of the findings (9-13).

Data collection was performed using a standardized questionnaire that had been previously adopted and validated for similar studies. This questionnaire was designed to comprehensively evaluate the dimensions of knowledge, attitudes, and practices related to therapeutic communication. Nurses with at least five years of professional experience in the hospital setting were included in the study, ensuring that participants had sufficient exposure and relevance to the topic. Nurses who were unable to participate due to workload or had less than five years of experience were excluded from the study to maintain the study's focus on experienced staff (14-16).

Ethical considerations were stringently adhered to throughout the research process. The study was conducted in accordance with the Declaration of Helsinki guidelines for ethical research involving human subjects. Prior to data collection, all participants were informed about the purpose of the study and their voluntary participation was secured along with written informed consent. Confidentiality and anonymity of the respondents were strictly maintained by coding the questionnaires and securely storing the data.

The collected data were analyzed using the Statistical Package for the Social Sciences (SPSS), version 25.0. Descriptive statistics were used to summarize the demographic variables and the main study variables related to knowledge, attitudes, and practices. Inferential statistics, including chi-square tests and t-tests, were employed to explore the relationships and differences among the studied variables. This analytical approach provided a robust framework for understanding the dynamics of therapeutic communication within the nursing staff at the facility.

RESULTS

The study's findings provide an in-depth understanding of the demographic composition, knowledge, attitudes, and practices of nurses concerning therapeutic communication at a tertiary care hospital. The demographic data indicated a young workforce with the majority of nurses aged between 20 to 25 years, comprising 41.6% of the participants, followed by those aged 26 to 30 years at 31.2% (Table 1). Those aged 31 to 35 years and above 35 years constituted 21.1% and 7.1% of the sample, respectively. The gender distribution was notably skewed towards female nurses, who represented 85.1% of the respondents, compared to 14.9% who were male.

Table 1: Demographic Variables of the Study Participants

Variables	Frequency	Percentage (%)
Age		
20-25 years	64	41.6
26-30 years	48	31.2
31-35 years	31	21.1
Above 35 years	11	7.1
Gender		
Male	23	14.9
Female	131	85.1
Marital Status		
Single	66	42.9
Married	88	57.1
Qualification		
Diploma in General Nursing	47	30.5
Post RN	56	36.4
BSN (Generic)	51	33.1
Service Years		
5-10 years	113	73.4
11-15 years	32	20.8
16 Above years	9	5.8
Current Unit		
Medical Nurse	73	47.4
Surgical Nurse	23	14.9
Gynae Nurse	30	19.5
Other Nurse	28	18.2

Table 2: Knowledge of Nurses Regarding Therapeutic Communication

Level of Knowledge	Frequency	Percentage (%)
Low Knowledge	51	33.1
Moderate Knowledge	60	39.0
High Knowledge	43	27.9

Table 3: Attitude of Nurses Regarding Therapeutic Communication

Level of Attitude	Frequency	Percentage (%)
Positive Attitude	88	57.1
Negative Attitude	66	42.9

Table 4: Practice of Nurses Regarding Therapeutic Communication

Level of Practice	Frequency	Percentage (%)
Good	95	61.7
Bad	59	38.3

Marital status showed a nearly balanced division with 57.1% of the nurses married and 42.9% single. The educational qualifications varied among participants; 36.4% had completed a Post RN qualification, 33.1% held a Bachelor of Science in Nursing (BSN), and 30.5% had a diploma in general nursing. Regarding years of service, a significant majority (73.4%) had been in service for 5 to 10 years, indicating a relatively experienced workforce. The remaining participants had 11 to 15 years and more than 16 years of service, making up 20.8% and 5.8% of the sample, respectively. Nurses were predominantly from medical units (47.4%), with others working in surgical (14.9%), gynaecological (19.5%), and other nursing units (18.2%).

When examining the knowledge levels regarding therapeutic communication, 39.0% of the nurses exhibited moderate knowledge, whereas 33.1% were assessed to have low knowledge, and 27.9% demonstrated high knowledge (Table 2). These findings suggest a significant variation in the understanding and implementation of therapeutic communication principles among the nursing staff.

The attitudes towards therapeutic communication were also diverse; more than half of the nurses (57.1%) expressed a positive attitude towards engaging in therapeutic communication with their patients, while 42.9% held a negative attitude (Table 3). This split highlights the potential areas where interventions could be targeted to improve attitudes towards patient interaction.

Regarding the practices of therapeutic communication, 61.7% of the nurses were found to have good practice habits, actively utilizing therapeutic communication techniques with patients. However, 38.3% of the nurses were observed to have poor practices in therapeutic communication, underscoring the need for enhanced training and practice opportunities to bridge this gap (Table 4).

Overall, these results underline the importance of focused educational and training programs to bolster the knowledge and skills related to therapeutic communication. Such initiatives could potentially lead to more consistent practices across the board, fostering a more supportive and effective healthcare environment for patients.

DISCUSSION

The study aimed to assess the knowledge, attitudes, and practices of nurses regarding therapeutic communication at tertiary care hospitals in Lahore. Utilizing a descriptive cross-sectional design, the study applied descriptive statistics and frequency distribution; data normality and reliability were confirmed, ensuring the validity of results using an adopted version of a questionnaire. Demographically, the majority of nurses were aged between 20-25 years, reflecting a younger workforce. The predominance of female nurses in the sample (85.1%) aligns with the broader trend in the nursing profession, which is predominantly female as supported indicating a significant gender disparity in registered nurses (17-19).

The findings revealed that 39.0% of nurses possessed a moderate level of knowledge regarding therapeutic communication, with 33.1% demonstrating low knowledge and 27.9% high knowledge. This distribution suggests a need for enhanced educational efforts, as similar studies, such as those conducted in Baghdad City, have also reported moderate levels of knowledge among nurses (13). Concerning attitudes, more than half of the nurses recognized the importance of improving therapeutic communication, echoing sentiments from a study in Western Ethiopia which found a predominantly positive attitude among nurses (2).

In practice, a significant proportion of nurses regularly applied therapeutic communication techniques, particularly in pre-operative and post-operative care, with 61.7% exhibiting good practice. This is consistent with findings from Kandy District, Sri Lanka, underscoring the widespread acknowledgment of the efficacy of therapeutic communication in clinical settings (10).

Despite these strengths, the study faced limitations due to its cross-sectional design and the relatively small sample size, which may restrict the generalizability of the findings to other settings. Additionally, while the study focused exclusively on nurses, therapeutic communication is crucial for all healthcare personnel who interact directly with patients (20-22).

Given these considerations, future research should expand to include empirical studies that not only assess knowledge and practice among nurses but also develop targeted interventions to enhance these aspects. Furthermore, extending the research to include other healthcare staff could provide a more comprehensive understanding of the dynamics of therapeutic communication across different professional roles within healthcare settings. Such studies could help in devising more effective strategies to improve therapeutic communication, ultimately enhancing patient care and outcomes (4, 11).

CONCLUSION

The study conclusively highlights that while a majority of nurses at tertiary care hospitals in Lahore show a moderate level of knowledge and generally positive attitudes towards therapeutic communication, there is a palpable need for ongoing professional development in this area. Effective therapeutic communication is indispensable for fostering trust and understanding between nurses and patients, which significantly enhances patient care outcomes. To address the identified gaps, healthcare institutions should consider implementing targeted training programs and include therapeutic communication as a core component of continuous professional education for nurses and other healthcare professionals. This strategic emphasis will likely lead to improved patient satisfaction, better adherence to treatment plans, and overall enhanced healthcare delivery.

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