Investigation of the effect of communicational empowerment pattern on nursing student’s communicational competency

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Abstract:
INTRODUCTION: Today medical education is focusing on teaching human and communicational skills, just like the basic theories in medicine. Making effective and efficient contacts and communications are very important in nursing. Although these studies had shown that these skills are poor among nurses. Due to this, it is important to teach these skills to all health-care providers. This study aimed to investigate the effect of communicational empowerment pattern on nursing student’s communicational competency.

MATERIALS AND METHODS: This study was conducted on 78 senior nursing students who were chosen randomly by the census method. Respondents were divided into case and control groups. In case group, the communicational empowerment method was conducted and in control group, no interventions were done. Data were collected by communicational competency questionnaire. Data were analyzed using descriptive statistics, Pearson correlation, and t-test through IBM, SPSS version 19, United States 2016. The significance level was considered 0.05 respectfully.

RESULTS: The mean age was 22.23 ± 1.80. In the case of marital status, a number of 63 respondents were single and 15 were married. The mean score of communicational competency in case group was 112.38 ± 19.20 before intervention and 128.95 ± 11.98 after intervention. In control group, the mean score of communicational competency before intervention was 107.55 ± 14.22 and after intervention, it was 117.11 ± 15.37. There was not any significant relationship between case and control groups in the mean score of communicational competency before intervention (P = 0.0187), but a significant relationship was assessed between case and control groups in the mean score of communicational competency after intervention (P < 0.001). The level named “Good” in communicational competency was increased among respondents from 56.8% to 90.9%.

CONCLUSION: Using the communicational empowerment method in clinical education is possible and it increases the communicational competency.

Keywords:
Communicational competency, communicational empowerment pattern, nursing, students

Introduction
Preparing students for being responsible in the clinical environment is one of the main goals of medical universities.[1] Today, medical education is focusing on teaching human and communicational skills, just like the basic theories in medicine. These skills are usually judged as indicators of individual’s competency and abilities.[2] Many authorities and scientists believe that having communicational skills is necessary for health-care providers and can help them to provide better care to patients.[3,4] Communication is an organized small talk which aims to do jobs such as collecting information, giving information to patient, knowing each other’s favorites and

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dislikes, teaching and consulting. In other words, communicational skills are abilities which nurses can use them to get emotional relationships with their patients. Communicational skills are categorized into basic and advanced skills according to the WHO mental health expert’s categorizing system. Intrapersonal communicational skills are a part of basic skills, according to this division. These skills include sorting the emotions, understanding the verbal and nonverbal messages, attitude toward communication process and being firm in communication which are the basics in communicational skills. Communicational skills are so important that the lack of them may lead to depression, loneliness, anxiety, and low self-esteem. Providing care while considering the needs of patients and respecting them would give the patients the right to choose their plans of treatment and care. Such matters need high abilities of communication to happen.

These abilities are necessary for patient safety, reducing medication errors, patient satisfaction, and intrapersonal communication. Having good communicational skills would have positive effects such as betterment of vital signs, decrease in pain and stress, increase in satisfaction, and better corporation from patients. All above-mentioned matters are more important in patients who are hospitalized for a long time. Lack of proper communication would lead to misdiagnosis, poor corporation from patients, and not giving good information to patients. Nursing is a profession which values are very important and working in this profession needs more communicational skills. Due to this, communication is really important in nursery. Conducting proper and correct nursing interventions seeks good communicational skills. Communicational skills are the basics in providing good care to patients in nursery. Nurses should have good communicational skills to get aware about their patient’s demands and find out which intervention and procedure is the best for them. Contacts between nurses and their patients would make nursing cares dynamic. Teaching the communicational skills is necessary for all health-care providers. Zamani et al. study had shown that despite age and sex and field of study all the faculty members had a positive attitude toward teaching communicational skills. Making effective and efficient contacts and communications is very important in nursing. Despite this studies had shown that these skills are poor among nurses. Other study had shown that communicational skills are poor among students too. Students see making communication with patient a trouble for themselves. In Peyravi et al. study communicational skills were in a moderate level among students. Due to these matters, improvement of communicational competency among students is one of the aims of nursing education. According to the importance of communicational skills in nursing and poor levels of this skill among nurses and nursing students and due to this that there were no comprehensive studies about this topic this study aimed to investigate the effect of communicational empowerment pattern on nursing student’s communicational competency.

**Materials and Methods**

This case–control study was conducted on two case and control groups before and after intervention. Communicational empowerment method was conducted as intervention in case group on communicational competency. A number of 87 nursing students were included in this study which were chosen by census method in two semesters (winter semester of 2015–2016 including 45 senior students and spring semester of 2016–2017 including 42 senior students). Inclusion criteria included being a student of nursery and exclusion criteria included dismissing the study program. The communicational competency questionnaire was used for data collection. It contained 37 questions in three dimensions including: basic communication, care communication, and management communication. The first dimension includes five questions which assesses the student’s abilities at the beginning of communication. The second dimension includes 20 questions about how students make communication with patients and their families about nursing process. Moreover, the third dimension includes 12 questions about how students make communication with nursing staff for providing proper and needed information to them. Student’s ability was assessed with a four-point scale in each question (<30%, 30%–50%, 50%–70%, and 70%–100%). The score 37–74 was considered poor, 74–111 was moderate, and 111–148 was good. The validity of the questionnaire was proved in Poorfarzad et al. study and the reliability was calculated by the internal constancy method and the Cronbach’s alpha was 0.86 and 0.97 for different dimensions. The Cronbach’s alpha was 0.96 for whole tool.

After introductions and explaining the aims of the study to students they were divided into two groups. In the beginning of the semester both groups completed the communicational competency questionnaire at first. Students were asked to fill the questionnaires carefully with all attention. Then in control group usual education was conducted by their mentors and nurse educators. In case group, the communicational empowerment method was used for teaching. Communicational empowerment method includes four steps including: situational analysis, sensitization, control, and evaluation. The first step was a situational analysis which included filling the communicational competency questionnaire. In the second step, students were able to know what the main problem is and how important is it and motivation...
Table 1: Comparison of mean scores of communicational competency among students and each dimension of that between before and after intervention in case and control groups

| Dimensions                      | Group  | Means±SD          | P    |
|---------------------------------|--------|-------------------|------|
| Communication competency        | Case   | 16.56±18.22       | 0.07 |
| (total score)                   | Control| 9.55±18.14        |      |
| Basic communication             | Case   | 2.13±3.52         | 0.71 |
|                                 | Control| 2.51±5.63         |      |
| Care communication              | Case   | 9.61±11.77        | 0.05 |
|                                 | Control| 4.67±11.46        |      |
| Management communication        | Case   | 4.81±6.48         | 0.09 |
|                                 | Control| 2.37±7.16         |      |


d=Standard deviation

for having good skills in these abilities were given to them. For this reason, 30–45 min meetings were held for case groups about the importance of matter and the steps of this process. Continuing the same step during the semester, some other meetings were held based on recognizing the challenges for each group. These challenges included teaching motivational pattern, holding problem solving workshops using thinking rain method, sharing situational experiences, making scenarios, and solving them by nursing students. In the third step, researcher watched the control group and the effect of intervention on their behaviors and weather did they work or not. In the fourth step, after filling the questionnaire after intervention the study was over for both case and control groups. These steps were done for both semesters. Data were analyzed by descriptive statistics, Pearson correlation and t-test through the SPSS version 19 IBM United States. The significance level was considered 0.05 respectfully. This article is derived from the master’s degree in nursing thesis and the ethical code IR.ZAUMS.REC.1395.23 at Zahedan University of Medical Sciences.

Results

The mean age was 22.23 ± 1.80 in this study. Thirty-six (41.4%) respondents were males and 42 (58.6%) were females. 63 (72.4%) respondents were single and 15 (27.6%) were married. The Pearson correlation test did not show any significant relationship between age and mean score of communicational competency (P = 0.384). Hence was between gender (P = 0.09), semester (P = 0.118), marriage status (P = 0.191) with mean score of communicational competency. The difference between the before and after intervention score was higher in case groups [Table 1]. There was not any significant relationship between case and control groups in the mean score of communicational competency before intervention (P = 0.0187), but a significant relationship was assessed between case and control groups in the mean score of communicational competency after intervention (P < 0.001). The mean score of case groups were more than control groups at first. The mean score of case group were more after intervention too [Table 2]. The mean score of respondents was more in case groups [Table 2]. The level named “Good” in communicational competency was increased among respondents from 56.8% to 90.9% [Table 3].

Discussion

The results of this study had shown that the mean score of communicational competency was significantly higher in case group. These results were consistent with the results of study conducted by Namdar et al.[24] Fakhr-Movahedi et al. showed in their study that the teaching based on communicational competencies pattern is effective for nursing students.[13] Zamani et al. study also had shown that teaching the communicational skills to general physicians could lead to patient’s satisfaction. He suggested in his study that teaching communicational skills should be a part of the medical educational program.[15,26] Making communication and contact with other people is an important factor in human life and when someone communicates other people other people would be happy with them and he would feel valuable.[27] Human abilities are really close to their communicational skills, but it is strange that why people do not pay attention to this vital skill. Medical students who are going to be the future health-care providers must have this ability. A part of a medical education program is in hospitals so having good communication with nurses and patients seems necessary for students. This can help to take forward the whole program.[28] So having good communicational skills would help the medical students to have a better performance in clinical environments.[29,30] Good communicational skills make nurses able to recognize their patients and meet their demands. Nursing students must know communicational skills to collect complete histories from patients.[11,31]

Having good communicational skills is necessary for making intrapersonal communications to provide high-quality cares. Incorrect prescribing of physicians, unsafe drug administration of nurses, the lack of pharmaceutical knowledge of the health-care team, and the weak professional collaboration lead to medication errors.[32] When a nurse has high intrapersonal communication skills he or she can collect complete information about his patients, use better procedures and reduce their duration of hospitalization.[30] Good communication is the base of high quality of nursing care.[32] Despite all of these Salimi et al. reported in their study that the communicational skills are poor among students.[4] Khatibezanjani and Ahrari’s study also showed that nurses who are graduated
and have bachelor’s and master’s degrees have poor communicational skills. As mentioned previously communicational skills are important for nurses[34] and patients expect good communication from their nurses so nurses should meet this demand and make good communication cause lack of this communication is the reason of many problems in hospitals.[35] Nursery is close to communication[34] and none of the professions need this kind of complicated communication.[35]

**Conclusion**

Using the communicational empowerment method in clinical education is possible and it increases the communicational competency. This study suggests the clinical mentors get educated about how to proceed with this process and conduct this method in their clinical rounds.

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**Conflicts of interest**

There are no conflicts of interest.

| Table 2: Comparing the mean score of communicational competency of students and its dimensions before and after intervention in case and control groups |
|-----------------------------------------------|
| Communicational competency dimensions | Case groups | Control groups |
| | After | Before | After | Before |
| Basic communication | 17.20±2.80 | 15.06±3.23 | 16.06±5.57 | 13.55±2.78 |
| Care communication | 67.61±8.12 | 58.00±12.39 | 59.83±9.03 | 55.16±9.58 |
| Management communication | 44.13±3.00 | 39.31±6.06 | 41.20±5.21 | 38.83±5.93 |
| Communicational competency (total score) | 128.95±11.98 | 112.38±19.20 | 117.11±15.37 | 107.55±14.22 |

| Table 3: Frequency distribution of communicational competency among students before and after intervention in case and control groups |
|-----------------------------------------------|
| Communication competency | Control | Case |
| | After (%) | Before (%) | After (%) | Before (%) |
| Good | 28 (65.1) | 20 (46.5) | 40 (90.9) | 25 (56.8) |
| Moderate | 15 (34.9) | 23 (53.5) | 4 (9.1) | 18 (40.9) |
| Poor | 0 | 0 | 0 | 1 (2.3) |

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