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Attitudes towards communication skills among nursing students and its association with sense of coherence

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ABSTRACT

The aim of the study is to examine the relationships between attitudes towards communication skills, self-evaluation of communication abilities, and sense of coherence among students of nursing. A cross-sectional correlational study design was employed. Altogether, 227 university nursing students participated in the study (20.53 ± 2.04 ; 96.9% females). Communication Skills Attitudes Scale (CSAS), Sense of Coherence Scale (SOC), and short self-evaluation scale of communication ability of own design were used. The results showed a high average score in the positive attitudes subscale and moderate negative attitudinal scores in the CSAS questionnaire, as well as positive self-evaluation of the communication abilities among students. The positive subscale of the CSAS was positively related to the sense of coherence ($p = 0.05$), while the negative subscale of the CSAS was negatively related to the sense of coherence ($p \leq 0.001$). The study showed that sense of coherence is associated with more positive attitudes towards communication skills. Understanding the factors associated with the effective communication strategies provides an important base for improving the content of the current communication curriculum in nursing study programs.

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Introduction

Communication is an important topic, perceived as inevitable for providing effective and high quality health care among both patients and health care professionals. Research evidence has

shown the import role of communication in a number of health care related outcomes, such as better utilization of health care, better patient compliance, higher social support, or improved clinical outcomes and prevention [1–3]. Research findings also showed that contrary to expectations, most patients did not report that their most memorable experiences were related to

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the clinical or technical quality of the care they received, but rather they were associated with the personal attitude or interpersonal communication by health care professionals [1]. Street et al. [2] conclude that the pathways through which the quality of clinicians/patient communication can influence the health outcomes may be both direct and indirect. The direct pathway may be shown for instance in lowering physiological arousal and pain, enhancing well-being and lessening anxiety of patients by empathic communication provided by health care professionals. In a more indirect way, communication influences factors such as satisfaction with care, motivation to adhere, trust in the clinician and health system, self-efficacy in self-care, or cooperation between patient and clinician.

Inter-professional communication within the health care team is also essential for providing effective health care. Quality of team cooperation and communication plays a vital part in fostering a healthy work environment, increasing job satisfaction, preventing burnout syndrome and lowering health care professionals' intentions to leave [3–5]. Some studies have also demonstrated a relationship between the effectiveness of communication and the occurrence of medical errors [6,7].

The level of communication skills among students of the healthcare professions have been explored in a number of studies. However, most of the studies aimed at attitudes towards the importance of communication skills were focused on medical students [8–11]. Examining the attitudes towards communication skills among students of health care professions is important due to a close relationship between individual's attitudes and behaviour in social situations, as shown in the often cited "Theory of reasoned action" [12]. Based on this theory, a behavioural change might be evoked by the change of a person's attitude. As the behavioural component of the attitudes are manifestations of underlying cognitive and affective components, changes in behaviour might be provoked by influencing the related aspects of attitudes: cognitive and emotional component [10]. This theoretical background might be effectively used in the education process, and demonstrates the importance of exploring the attitudes towards communication among students of the healthcare professions. Negative attitudes towards learning communication skills and an inability to perceive communication as an important part of effective healthcare might negatively influence the effectiveness of the education process in the health care professions.

The relationship between communication skills and personality traits among health care professionals has been explored less often, although some studies have studied empathy in the context of communication skills training [12–14]. The present study is focused on a less examined personality trait: the sense of coherence and its association with communication skills attitudes. Sense of coherence (SOC) is defined as an individual's ability to cope with difficult situations and to maintain physical and mental health in stressful life situations. SOC is composed of three dimensions, including comprehensibility (the capacity to perceive the world and life events as understandable, ordered and, to some extent, predictable), manageability (the confidence that one has the necessary resources to deal with environmental demands successfully) and meaningfulness, the belief that life

is worthwhile and that the challenges in life deserve the investment of effort and resources [15].

The objective of this study is to examine the attitudes towards the importance of communication skills in clinical practice and the education process among students of nursing, as well as exploring the self-evaluation of communication skills among students. Another objective of the study is focused on the relationship between attitudes towards communication skills and sense of coherence among students of nursing.

Materials and methods

Design

A cross-sectional correlational study design was employed in the present study.

Participants and data collection

Altogether, 227 university students from the full-time bachelor study programme "Nursing and Midwifery" participated in the study (average age 20.53, SD = 2.04; 96.9% females; 84.6% nursing students). The study is based at an academic setting, it was carried out at two Slovak universities which are providing education in the bachelor study program "Nursing and Midwifery" (Jessenius Faculty of Medicine in Martin of the Comenius University in Bratislava: 25.9% of students in our sample, and Trnava University: 74.1% of students) (Table 1). The convenient sampling method was used. Response rate for this study was 89.1%. Data collection took place between November 2016 and January 2017. Hard copies of the questionnaires were distributed among students. Students in the 2nd and 3rd year of their studies took part in the research; all students filled-out the questionnaires after they participated in the training program for the improvement of communication skills, which is as an integral part of the study programme at both universities. This training of communication skills consists of an interactive course spanning one semester (2 h per week) and includes interactive group techniques and role playing; with the following issues incorporated into the lectures: non-verbal communication, social skills, active listening, assertiveness, conflict resolution skills, group decision processes, cooperation within the team, and stress management.

Attitudes towards communication skills were measured using the CSAS (Communication Skills Attitudes Scale). This scale was originally developed by Rees et al. [16] for the purposes of measuring attitudes towards communication among medical students. For the purposes of this study, all questions were modified in such a way that their meaning was related to the study of nursing instead of the study of medicine. CSAS consists of 26 items divided into two subscales: 13 items are written in the form of positive statements (positive attitudes subscale), and 13 items are formulated as negative statements about communication skills learning (negative attitudes subscale). Each item is accompanied by a 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). The total score in each subscale

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