



THE IMPACT OF EMPOWERMENT OF NURSES' COMMUNICATION SKILLS ON LEARNING THE TRAINING PROVIDED TO HOSPITALIZED CHILDREN'S MOTHERS

Elham Moradi¹, Parvaneh Khorasani.², Mahboubeh Namnabati^{3*}

1-Students Research Center, School of Nursing and Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran

2-PhD, Assistant professor, Department of Community Health Nursing, Faculty of Nursing and Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran

3-Nursing and Midwifery Care Research Center, Faculty of Nursing and Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

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ABSTRACT

Introduction: Mothers' knowledge of what occurs at the admission and during hospitalization as well as their acquisition of skills in the care of children, reduce their anxiety and confusion and increase their confidence in the care of the child. With effective communication, nurses can play a key role in educating mothers and encouraging them to learn in terms of knowledge and performance. Therefore, the present study aimed to determine the impact of empowerment of nurses' communication skills on learning the training provided to hospitalized children's mothers. **Method:** This study is clinical trial and conducted with two control and experimental groups. 128 mothers whose children were hospitalized in the children ward of the Imam Hussain (AS) Children Hospital in Isfahan, were selected by convenience sampling method and then divided into two control and experimental groups and 30 nurses working in the same ward were participated in the study by census method and then, randomly divided into two control and experimental groups. Communication skills workshop was held for experimental group of nurses. In this workshop, the methods of role-playing, collaborative discussion, broadcasting and criticism of film, etc. were used. The data was collected using researcher-made questionnaire of assessment of learning the training provided to mother. The questionnaires were filled out two times of before and a month after intervention. SPSS 16 software was used to analyze the data. **Results:** The results of the study showed that in the experimental group, mothers' average learning score was 46.03 before intervention and it was 80.1 after intervention. This shows a significant difference between them ($p < 0.001$). In the control group, mothers' average learning score was 62.9 before intervention and it was 65.5 after intervention and no significant difference was observed between them ($p > 0.001$). **Discussion and conclusion:** empowering nurses' communication skills in order to educating the families who have hospitalized child, especially through teaching methods such as role-playing, collaborative discussion, broadcasting and criticism of film, etc. enhances learning of training provided to the hospitalized children's mothers by nurses.

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Introduction

Good communication is of patient's important needs and also considered as a very important aspect of nursing care. In addition to provision of information about the disease and its treatment to the patient, understanding the patient's concerns, better

empathy, mental support, improved physical, mental, behavioral outcomes and patient's comfort are provided with good communication [1].

Violence, ignoring the sick, indifference, intolerance and disregard for the presence of patient are the behaviors that cause patient's dissatisfaction [2]. Patient Safety Joint Commission, in 2009, stated that promotion of care provider's effective communication with patients is one of its objective. According to the commission, a less close relationship between patient and nurse impacts on patient safety. The Commission considers a patient as an important information resource that in the case of communication with him/her, knowledge of risky situations and negative consequences is provided [3].

Having an effective communication, especially at the time of hospitalizing a child, is of great importance [4]. Having a patient child hospitalized is a major source of stress and anxiety for parents. With hospitalizing a child in hospital, the parents may experience emotional stress, feelings of guilt, fear and insecurity and the children show feelings of insecurity, guilt and anger after hospitalizing in hospital [5].

In this situation, parents' roles and responsibilities change and they have to be adapted to these conditions and deal with their new role [6]. The process of dominating on the new role has not been done easily. But parents' participation in the care of child, effective communication and proper training can facilitate it [7].

Here, the necessity of knowing parents' needs, which depends on culture, place and time, to meet them is one of the nurses' tasks [8]. It should be noted that some parents are reluctant to express their needs or unable to express them and this would adversely affect the care of child. Also, parents and care provider may have different understanding of the needs [9].

The studies show that when health care professionals have communication skill, many positive reactions, such as reducing anxiety, guilt, pain and symptoms, participation and collaboration with treatment team, improved physiological, functional conditions and increased effect of education given to patients can be observed [10-12]. The studies show that effective communication is reached when nurses learn communication skills and more importantly, use them in practice [13]. According to a study conducted by Heaven, many nurses are familiar with communication skills but they cannot use them in practice [14]. Cheraghi (2016), in a study, showed that if these skilled are applied properly, they will be effective in reducing the stress of hospitalized child [15].

Sourani (2015) stated that nurses as a key component in the recovery and rehabilitation of patients can play indispensable role. Apart from treatment, the patient requires a good behavior and moral relationship that this would accelerate the recovery. The nurses' good behavior with patients can supplement the patient's recovery process, so, training the department of medicine in order to have the best behavior in different situations can be very useful [16].

Dithole (2016) also stated that communication is an integral part of nursing. The nurses working in hospitals have the experiences in intensive activities and at the same time, they must respect the patients' rights when communicating and provide the training required to the patient or his/her caregiver in order to care him [17].

Weert (2013) stated that nurses' communication skills can be improved by training communication skills. Family caregivers of patients should receive information resources and limited support available for patients from the nurses in order to play the role of patient care by them [18].

In reviewing the studies, it is observed that different research has assessed the effect of communication skills on the satisfaction of patients and their caregivers and quality of care and no study has been conducted on the effects of communication skills on educating the patient and learning the provided training. Since communication skills is one of the factors affecting training the patient and with educating communication skills to the nurses, they can use different communication approaches to respond to a range of different needs and situations of patients [19]. On the other hand, the training provided to the hospitalized patients' mothers, facilitates the care and their needs will be met and this reduces their anxiety and confusion and increases their confidence in the care of child, so, the present study aimed to determine the impact of empowerment of nurses' communication skills on learning the training provided to the mothers of children hospitalized in the Imam Hussain (AS) Hospital in Isfahan City in 2016.

Method

The present study was clinical trial and also pretest-posttest with control group which has been conducted on mothers whose children were hospitalized in the Imam Hussain (AS) Hospital in Isfahan City and the nurses working in it in 2016. Inclusion criteria for mothers were including: first admission of the children and hospitalization, being hospitalized for 2 days, speaking in Persian and their consent in order to participate in the research and inclusion criteria for nurses were including: nurses' willing to participate in the study, working in morning, afternoon and evening shifts for 6 months, the lack of experience of a traumatic event such as an accident, death of loved ones, divorce, etc., enrolling in the workshop of continuous training of personnel in last six months and their consent to participate in the study.

In the present study, the samples were selected from the mothers whose children were hospitalized in the wards A and B and also eligible according to the inclusion criteria by convenience sampling method. The samples of nurses were selected from the nurses working in these two wards and eligible according to the inclusion criteria by census method. Then, randomly, the mothers whose children were hospitalized in one of the two wards and the nurses working in the same ward were considered as a control group and the caregivers and nurses working in another ward were considered as experimental group (the reason for selection of the personnel and caregivers of one ward as control or experimental group is to minimize the information leakage from the workshop held among the nurses).

Sample size of mothers was estimated 128 according to the formula at the significance level of %95 and with test power of %80. They were divided into control and experimental groups (4 32-people groups) at the steps of before and after intervention. Sample sizes of nurses group was 30 (two 15-people control and experimental groups).

Research tool: in the present study, the tool was mothers' learning questionnaire. It included two parts: 1. Demographic information and 2. 20 questions about knowledge and performance which was designed based on 5-point Likert scale in accordance with the form of training the patient set based on accreditation standards (on admission and during hospitalization) attached to the patient's record. According to mother's knowledge and performance in the use of training provided to them during the hospitalization of her child, the questionnaire was filled out through observing the performance and interviewing with her.

The objective of this questionnaire is to study the training provided to the patients by the nurses based on the accreditation standards and also to review the books and articles on this topic and then, its content was examined by 10 faculty members of the department of Children and Infants, the School of Midwifery and Nursing, the Isfahan University of Medical Sciences and the members of strategic committee on patient education, Vice-Chancellor in Treatment Affairs, Isfahan Province. Then, the required changes were performed in order to increase its content validity. In order to examine the reliability, 10 people of research population who were eligible but they didn't participate in the study, were asked to fill out the questionnaires. Then, its reliability was estimated %86 using Cronbach's alpha.

Communication skills workshop was held for the nurses of experimental group. In this workshop, the methods of role-playing, collaborative discussion, broadcasting and criticism of film, etc. were used. A month after workshop, the questionnaires were filled out.

After gathering the questionnaire and scoring them, the data was analyzed using independent t-test and SPSS 16 software.

The necessary permits have been obtained from the related authorities, and informed consent was obtained from participants and it was ensured them that their information will not be misused and kept confidential.

Results

The results showed that the average age and work experience of nurses of experimental group were 29.2 and 5.9 years, respectively and the control group, they were 33.1 and 8 years, respectively. The results of independent t-test showed that no significant difference was observed between the two groups in average age and work experience ($p < 0.05$). In the experimental group, %66.7 of nurses were married and %33.3 of them were single and in the control group, %73.3 of nurses were married and %26.7 of them were single. The results if Fisher test showed that there was no significant difference between the two groups in frequency of marital status ($p > 0.05$). In terms of education, in the experimental group, %93.3 of nurses had bachelor's degree and %6.7 of them had master's degree. In the control group, %86.7 of nurses had bachelor's degree and %13.3 of them had master's degree. The results of Mann-Whitney test showed that there was no significant difference between the two groups in education status ($p > 0.05$)

The characteristics of hospitalized children's mothers are shown in (Table 1)

Table 1: The characteristics of hospitalized children's mothers

Variable	Experimental group				Control group				Test	
	Before intervention	Standard deviation	After intervention	Standard deviation	Before intervention	Standard deviation	After intervention	Standard deviation	F	P
Mother's age (year)	28.03	5.4	31.3	8.1	29.7	6.6	31.1	4.9	1.78	0.15
Length of illness	60	31.1	12.6	2.1	22.1	11.7	98.03	57.4	1.43	0.23
Length of hospitalization	4.3	0.4	4.2	0.4	4.9	0.6	5.6	0.7	1.42	0.24
Number of sister and brother	1.4	0.2	1.3	0.1	1.2	0.1	1.2	0.1	0.15	0.75
	Before intervention		After intervention		Before intervention		After intervention		Chi-square	

		N	Percent	N	Percent	N	Percent	N	Percent	χ^2	P
Mother's job	Housewife	27	87.1	31	96.6	28	93.4	29	93.5	10.3	0.33
	worker	0	0	0	0	1	3.3	1	6.5		
	Employee	3	9.7	1	3.1	0	0	0	0		
	Other	1	3.2	0	0	1	3.3	1	0		
Child's gender	Male	15	46.9	21	65.6	13	41.9	18	56.2	6.58	0.36
	female	17	53.1	11	34.4	18	58.1	14	43.8		
type of child's disease	Acute	24	77.4	23	74.2	23	71.9	20	71.4		
	Chronic	7	22.6	8	25.8	9	28.1	8	28.6	0.35	0.95
		Before intervention		After intervention		Before intervention		After intervention		Kruskal-Wallis	
		N	Percent	N	Percent	N	Percent	N	Percent	χ^2	P
education	Illiterate	1	3.2	1	3.2	0	0	0	0		
	Elementary	5	15.6	9	28.1	4	12.5	5	15.6		

	Secondary	5	15.6	10	31.3	9	28.1	8	25	2.65	0.45
	Diploid	18	56.2	7	21.8	17	53.1	12	37.5		
	Graduate (bachelor's degree)	2	6.2	5	15.6	2	6.3	6	18.8		
	post graduate (master's degree)	1	3.2	0	0	0	0	1	3.2		
Child's birth rank	First	15	46.9	13	40.6	13	40.6	13	40.6		
	Second	13	40.6	15	46.9	16	50	14	43.8		
	Third	3	9.3	3	9.3	3	9.4	5	15.6	0.31	0.96
	Fifth	1	3.2	0	0	0	0	0	0		
	Eighth	0	0	1	3.2	0	0	0	0		

The results of the study showed that in the experimental group, mothers' average learning score was 46.03 before intervention and it was 80.1 after intervention. This shows a significant difference between them ($p < 0.001$). In the control group, mothers' average learning score was 62.9 before intervention and it was 65.5 after intervention and no significant difference was observed between them ($p > 0.001$) (**Table 2**).

Table 2: Comparison between the experimental and control groups before and after intervention in average scores of learning and its dimensions (of 100)

Variable	Experimental group				Control group				Test
	Before intervention		After intervention		Before intervention		After intervention		Variance analysis

	Average	Standard deviation	Average	Standard deviation	Average	Standard deviation	Average	Standard deviation	F	P
Learning	46.03	17.1	80.1	12.7	62.9	17.1	65.6	16.6	23.99	<0.001
Knowledge	42.3	15.2	72.3	13.1	59.7	15.2	63.2	16.2	22.09	<0.001
Performance	50.1	21.7	89.2	16.6	66.9	22.6	69.2	18.9	20.05	<0.001

Discussion

Educating the patient and/or his caregiver is a systemic, targeted, well-organized and designed process which enhance the patient's self-care ability by changing his knowledge, attitude and skill and it can prevent the emergence of potential complications and eventually, it results in improvement of the patient. Patient education process is relatively identical to the process of communication because the effectiveness of education largely depends on the effective interpersonal communication.

The results of the present study show that empowering nurses' communication skills can enhance the mothers' learning and improve their knowledge and performance in the care of their children. In reviewing the studies, it is observed that no study, similar the present study, has been conducted on the impact of empowerment of nurses' communication skills on the patients and their caregivers' learning of the trained provided to them. So, the researcher has tried to use the results of the similar studied on the effects of communication skills training on other issues.

The results of a study conducted by Cheraghi (2016) showed that the nurses' ability to communicate with the child and his/her family can be effective in reducing the stresses of hospitalization of the child [15]. Sourani (2015) stated that the nurses' good behavior with patients can supplement the patient's recovery process [16]. Farmihani (2015) stated that effective communication is one of the major characteristics of nursing cares and is performed as a necessity in patient education and empowerment of the patients [20]. Salighehdar (2014) stated that nursing as a profession in constant contact with the patients is of the jobs in which learning communication techniques is of the most essential things that should be considered because good and logical communication with patients plays a very important role in accelerating the healing of their diseases [21]. Hemmati (2014) showed that there is a significant relationship between nurses' communication skills and Patient Safety in ICU [22]. Dithole (2016) also stated that communication is an integral part of nursing and it is required not only for health reasons but also to share information with patients and to education them [17]. The results of these studies are consistent with the results of the present study.

In the other hand, Rusk et al. (2009), in their study on the effects of educating communication skills to the nurses on the improvement of nurse-patient communication in a oncology clinic, reported that there is no significant differences between the communication skills scores obtained ($p=0.37$) and patients' satisfaction before and after intervention. In their study, a 2-day training workshop was held in the Cancer Center and one week and three months later, their communication skills were measured. This result is inconsistent with the results of the present study and the type of skilled trained and the follow-up after the intervention can be mentioned as the reason for this inconsistency [23].

Krvuijer et al. (2009) have reviewed 14 studies on the communication skill training in the nursing care and reported its effect on the nurses' skills in clinical practice and their actual behaviors and results of treatment of the patient [24].

The limitations of this study can be noted as follows:

1. Non-use of translator and exclusion of mothers who didn't speak in Persian. Such people, despite their needs for training, they are deprived of training and cannot meet their needs due to lack of effective communication with medical team.
2. The impact of the performance of other nurses and other people who were in the ward on the assessment of mothers. It was tried to control this limitation by considering the control group.
3. Mental state of mothers when responding to the questions

Conclusion

Given that empowering nurses' communication skills enhances the learning of mothers whose children are hospitalized and also increase their knowledge and performance on the care of child and participation in the treatment process and thereby reducing anxiety and confusion and increasing their self-confidence in the care of child, it is recommended that the authorities responsible for patient education and nursing, in addition to holding communication skills training courses in speech, try to hold workshop and use different scientific training methods such as role-playing, collaborative discussion, broadcasting and criticism of film and simulation of real situations, in which nurses are working, in order to empower the nurses' communication skills. Also, it is recommended to hold a workshop on the principles of patient education and its effects on the learning of training needed by the patients and their caregivers are assessed. Also, it is recommended to perform a study on the effects of the presence of a person specialized for patient education in each shift (so that irrespective of other heavy nursing

responsibilities, he/she educates the patient) on the learning of such training are investigated and the advantages of patient education are assessed and its effectiveness cost is examined.

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