

# Perceived Barriers to Therapeutic Communication among Nurses and Patients A at Tertiary Care Hospital in Lahore

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**Abstract:** Communication is a mutual process between two or more people. Effective and competent communication is the most significant component when trying to achieve the goal of quality care for patients. The aim of the study was to determine the barriers to therapeutic communication perceived by nurses and patients at a tertiary care hospital in Lahore. A descriptive cross-sectional study design was used. A sample of 220 participants was taken consisting of 110 nurses and 110 patients through the convenience sampling method. Data was collected by using close-ended questions. The results showed that enhanced workload and shortage of staff were the most acknowledged i.e. 50% and 49% respectively. But for patients pain, anxiety and physical discomfort, and privacy disturbance were the most perceived barriers to therapeutic communication with a percentage of 84%. The study concluded that there are multiple factors that hinder the establishment of a rapport between nurses and patients to facilitate therapeutic communication. It is of great significance to resolve these barriers to achieve the goal of providing quality care to patients.

**Keywords:** Barriers, communication, effective, nurses, patients, therapeutic.

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## I. INTRODUCTION

Communication is a multidimensional, composite, and vigorous process. Unable to converse efficiently is a key impending hindrance in the delivery of standard services in healthcare settings rather, this can lead to anxiety, misinterpretation, incorrect diagnosis, treatment errors, exposure to impediments, prolonged length of stay in hospital, depletion of resources as well as disappointment, and hence probable misplacements in outcomes (Amoah et al., 2018). Numerous theoretical and intangible methods have been employed in the healthcare setting, to improve health prognosis, involving patient-focused communication. Patient-focused communication has been recognized as a significant constituent in providing excellent health amenities (Alshammari, Duff & Guilhermino, 2019).

Nurses are usually the immediate professional point of contact for patients who arrive in hospitals for the care of their problems, how they address linguistic obstacles at that initial exposure and during the whole encounter affects patient experiences and consequences. Studies found that effective handling of language barriers during a patient's stay at the hospital reduces the length of stay, miscalculations, and readmissions (Gerchow et al., 2021). Nursing care must focus on patients and this person-centered care must recognize patients' experiences, and acquaintances and deliver care that concentrates and respects patients' preferences, values, and wishes by involving the patient more in the care process (Kwame & Petrucka, 2021). Gaining more information about ethnographic values and preferences in nursing care, especially in regard to nurse-patient communications, can lead to patient involvement and insights into the quality of care (Joo & Liu, 2020).

**Research objective:** The study was aimed to Identify the barriers to therapeutic communication among patients and nurses.

II. BODY OF ARTICLE

The study was conducted at a tertiary care hospital in Lahore using the descriptive cross-sectional study design. A total of 2200 interviews were conducted with nurses and patients to collect their responses. The participants were selected through a convenience sampling technique. After taking informed consent, data were collected through self-administered questionnaires comprising 3 components A, B & C with close-ended questions, nurses were requested to answer components A & B only and patients completed components A & C of the questionnaire.

A total of 110 registered nurses and 110 patients were interviewed. Majority of nurses 57.3% were female and 39.1% of the participating nurses were categorized in the age group of 26-35 years. When asked about work experience 48.2% of nurses had 2-5 years of working experience and 54.7% of nurses graduated with a diploma in nursing. Of the patients 49.1% were female, and 46.4% of them were aged between 26-35 years. The demographic characteristics of the participants are listed in table 1.

Table 1. Demographic characteristics of the participants (Component A of the questionnaire)

		Demographic Details	Frequency	Percentage
Nurses	Gender	Male	47	42.7%
		Female	63	57.3%
	Age	26-35	43	39.1%
		36-45	40	36.4%
		>45	27	24.5%
Patients	Gender	Male	54	49.1%
		Female	56	50.9%
	Age	26-35	51	46.4%
		36-45	59	53.6%
		>45		

Part B was designed to assess the perceived barrier to therapeutic communication by nurses. The majority of nurses 50% responded that increased workload during shifts is the biggest barrier to therapeutic communication and only 8% of nurses considered ineffective time management a barrier to therapeutic communication. Table 2 lists the frequency of nurses' responses to part B of the questionnaire.

Table 2. Frequencies of participants' responses (part C of the questionnaire)

Items	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
Increased overworked	35	20	26	23	6
Shortage of staff	29	25	29	31	6
Aggressive behavior of the patient	15	16	30	47	2
Prolonged disease process	25	14	10	39	20
Ineffective time management	6	4	30	53	17
Sophisticated environment	7	4	25	49	25
Inadequate knowledge	20	25	10	37	18
Different cultural values & spiritual beliefs	15	17	15	43	20
Lack of emotional support from peers	10	13	9	54	24

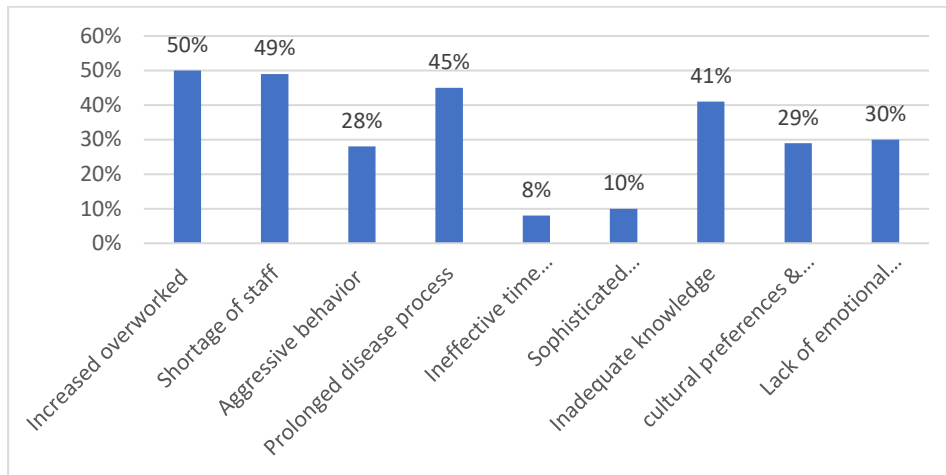


Fig. 1. Barriers to therapeutic communication perceived by nurses

Patients were requested to respond to part C of the questionnaire to assess the perceived barriers to effective communication. The anxiety, pain, and physical discomfort of the patient were the most favored response in patient-related barriers to therapeutic communication which is 83.6%. Moreover, 40% of the patients responded that the next identified Barrier of the patients to therapeutic communication was lack of privacy and the least perceived barrier was lack of trust with a percentage of 12%. Table 3 illustrates the responses of the patients to part C of the questionnaire.

Table 3. Frequencies of participants' responses (part C of the questionnaire)

Items	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Anxiety, pain, and physical discomfort	60	14	3	11	22
Language differences	19	14	10	43	24
Irritability due to the disease process	10	7	13	32	48
Lack of privacy	29	15	10	40	16
Lack of knowledge	13	12	13	23	49
Unwillingness to communicate	11	12	15	32	40
Excessive use of medical jargon by nurses.	16	9	12	31	42
Lack of empathy by nurses	7	18	32	39	14
Lack of confidence in nurses	5	10	23	27	45
Lack of trust	3	10	36	46	15

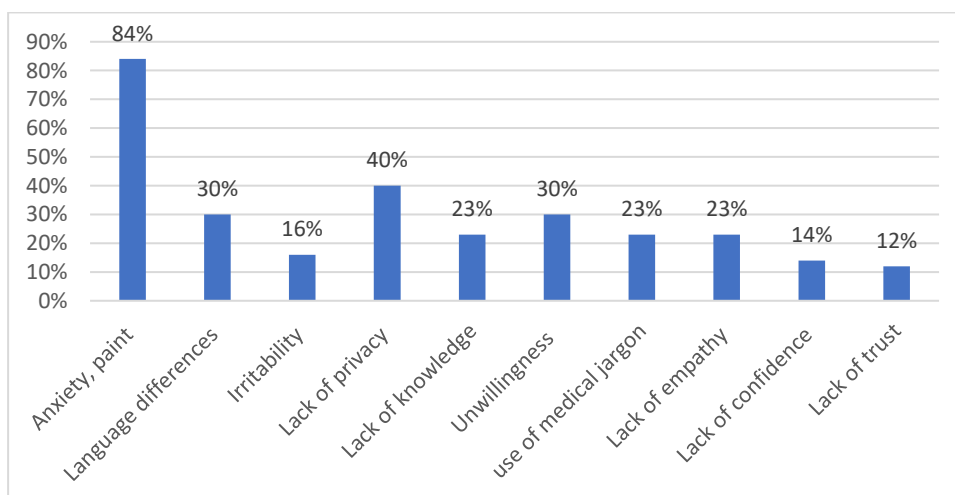


Fig. 2. Barriers to therapeutic communication perceived by patients

### III. CONCLUSION

The study concluded that there are multiple factors that hinder the establishment of a rapport between nurses and patients to facilitate therapeutic communication. It is of great significance to resolve these barriers to achieve the goal of providing quality care to patients. These simple but very significant factors are usually overload which affects the provision of quality care to the patients. Legislative organizations and hospitals must set some strict policies to cater to the prevailing issues and more prospective studies should target the study of different aspects of therapeutic communication.

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